

MISSOURI

State Board of Nursing Newsletter

The Official Publication of the Missouri State Board of Nursing with a quarterly circulation of approximately 130,000 to all RNs and LPNs



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Message from the President

Anne Heyen, DNP, RN, CNE

The Missouri State Board of Nursing, licensees and facilities all work together to ensure public protection. One aspect of public protection comes in the form of the Nursys e-Notify® system. Registered Nurses were prompted to sign up for e-Notify when renewing their nursing license earlier this year. Next year, the same will be true for Licensed Practical Nurses. This system is a wonderful way to keep up on when any nursing license you hold might need to be renewed, tracking a license and any discipline that might occur on your nursing license. This dynamic system is constantly updated as information is entered into the Nursys® database. By individual nurses signing up, this prevents you from forgetting to renew and possibly practicing on an expired nursing license, which is a violation of the Missouri Nurse Practice Act. Additionally, individuals signing up can help combat fraud in the nursing profession, as you will get real-time information when many changes occur with your nursing license.

Recently we had a situation where an employer was unaware of an employee having discipline and work restrictions on their nursing license. The nurse should have informed the employer, but he or she did not. However, the employer could prevent this from happening to them by creating a Nursys e-Notify® Institution account and enrolling all their nurses in that system. If an employer enrolls their nurses in this system, they, too, will get real-time information as the Nursys® database is updated. The employer would get an email notifying them if one of their employees has discipline on their license. The employer could then go into the Nursys e-Notify® system and view the actual order to obtain more information. This notification can also serve as a prompt to meet with the impacted employee. Employers enrolling their nurses into the Nursys e-Notify® system is another important aspect of public protection. Even better, this service is free as a product of the National Council of State Boards of Nursing, whose mission is to empower and support nursing regulators in their mandate to protect the public.

Executive Director Report

2019 Fiscal Year Statistics

by Lori Scheidt, Executive Director

The 2019 fiscal year for Missouri State government began July 1, 2018 and ended June 30, 2019.

The Board reviews complaints that are filed against the license of a nurse. Following an investigation, the Board determines whether or not to pursue discipline. The Board may impose censure, probation, suspension, and/or revocation.

The Board of Nursing may take disciplinary action against a licensee for violation of the Nursing Practice Act (see 335.066, RSMo). The Board is authorized to impose any of the following disciplines singularly or in combination:

- Censure—least restrictive discipline. A censure acts as a public reprimand that is permanently kept in the licensee's file.

COMPLAINT CATEGORIES FY 2019

1. Criminal 30%
2. Alcohol/Drugs 21%
3. Tax noncompliance 1%
4. Discipline or EDL 25%
5. Practice 18%
6. Unlicensed Practice 4%
7. Failed Alternative or Intervention Program 1%
8. Lawful Presence (not reflected on chart as the percentage of cases is less than 1%)
9. Fraud (not reflected on chart as the percentage of cases is less than 1%)



Executive Director continued on page 3

MO State Board of Nursing Practice Update

Debra Funk, RN, Director of Practice

Here we are ending another summer, preparing for those cool crisp days of fall. Holiday plans are stirring in everyone's mind. With all the hubbub, I just wanted to remind our APRNs about a few things. In the last several months, we have received some concerns from pharmacies regarding missing information on prescriptions from APRNs. Pursuant to 20 CSR 2200-4.200(3)(G)(7), "all prescriptions shall conform to all applicable state and federal statutes, rules or regulations and shall include the name, address and telephone number of the collaborating physician and collaborating APRN." This is not new language. It has been in place for many years. Many APRNs and employers/practices seem to be unaware of this requirement. Making these accommodations to a prescription pad is very easy. However, the EMR systems have been quite a challenge. APRNs who utilize an EMR system for prescribing didn't even know that the prescriptions being produced on the pharmacy end didn't have all the correct information on them.

Over the last few months, I have been working with Mercy Health System and BJC (Washington University) Health System in the St. Louis area to inform changes to their EMR systems to meet these standards. When a prescription does not have all the information required by law, the pharmacist either has to add the missing information or reject the prescription. Filling in missing information should not be a job of the pharmacist. It is the responsibility of the prescriber. In addition, a pharmacy can be cited by the Board of Pharmacy if they accept incomplete prescriptions.

On December 30, 2018, amendments made to 20 CSR 2200-4.100, Advanced Practice Registered Nurse went into effect. Among those amendments was a change to the titling required by the Nurse Practice Act for an APRN. Pursuant to 20 CSR 2200-4.100(3)(B), "a Registered Nurse (RN) recognized as an APRN by the MSBN shall use the title APRN and may include their role and population focus (NP with population focus, CNS with population focus, CNM or CRNA) and certification status, if applicable, for purposes of identification and documentation." In the previous language, you were required to use RN rather than APRN. You may include your educational credentials if you like, but it is not required.

Lastly, please remember to send the Board a copy of your re-certification prior to the expiration. Pursuant to 20 CSR 2200-4.100(3)(C), "it is the APRN's responsibility to be sure that their re-certification credentials have been received by the MSBN." You must also "maintain current RN licensure in MO or in another compact state." If your RN license expires, your Document of Recognition will expire. If your re-certification is not received by the Board prior to its expiration, your Document of Recognition will expire.

Please feel free to contact Ashley Williams, Practice Assistant, or myself with any questions you may have at 573-751-0073 or nursingpractice@pr.mo.gov.

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Important Telephone Numbers

Department of Health & Senior Services (nurse aide verifications and general questions)	573-526-5686
Missouri State Association for Licensed Practical Nurses (<i>MoSALPN</i>)	573-636-5659
Missouri Nurses Association (<i>MONA</i>)	573-636-4623
Missouri League for Nursing (<i>MLN</i>)	573-635-5355
Missouri Hospital Association (<i>MHA</i>)	573-893-3700

Number of Nurses Currently Licensed in the State of Missouri

As of October 1, 2019

Profession	Number
Licensed Practical Nurse	24,233
Registered Professional Nurse	110,143
Total	134,376

SCHEDULE OF BOARD MEETING DATES THROUGH 2020

November 6-8, 2019

February 26-28, 2020

May 19-21, 2020

August 19-21, 2020

November 4-6, 2020

Meeting locations may vary. For current information please view notices on our website at <http://pr.mo.gov> or call the board office.

If you are planning on attending any of the meetings listed above, notification of special needs should be forwarded to the Missouri State Board of Nursing, PO Box 656, Jefferson City, MO 65102 or by calling 573-751-0681 to ensure available accommodations. The text telephone for the hearing impaired is 800-735-2966.

Note: Committee Meeting Notices are posted on our web site at <http://pr.mo.gov>



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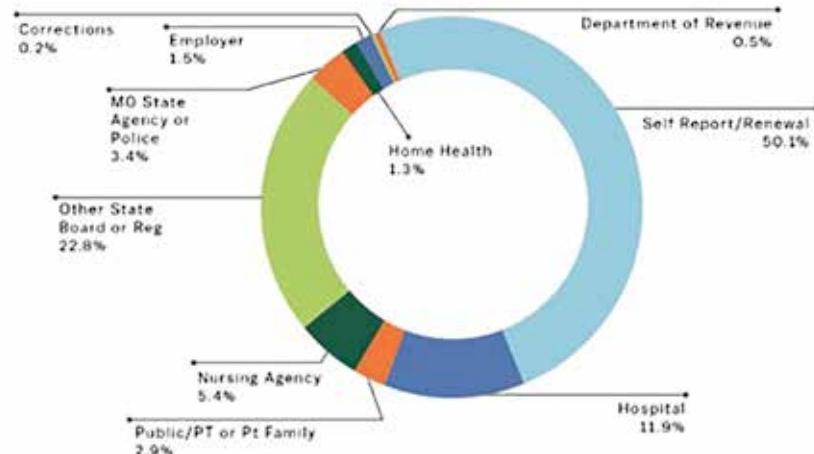
For more information contact Clarinda Dir:
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Hermann Area District Hospital, located in one of the most beautiful towns in the state of Missouri, is looking to hire FULL TIME ED/Med-Surg RN's for the Night Shift with a \$5,000 Sign-On Bonus.

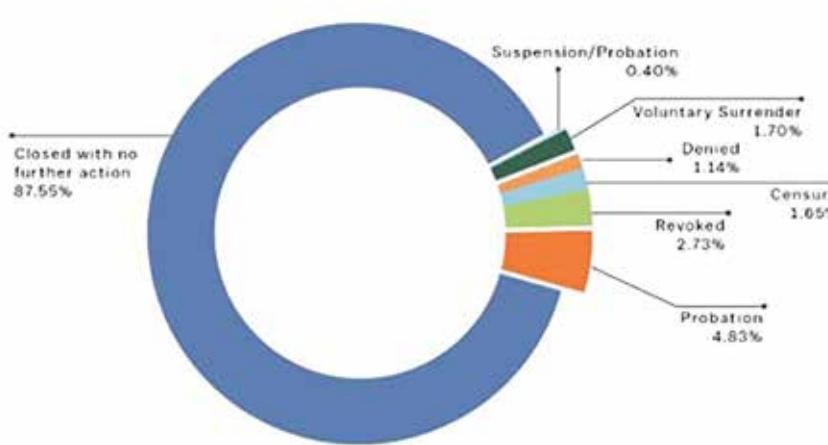
Hermann Area District Hospital
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Address: 509 W. 18th St. / P.O. Box 470, Hermann, MO 65041.

Executive Director continued from page 1**CLOSED COMPLAINTS BY SOURCE FY 2019**

The next chart shows the actions taken by the Board for those complaints and application reviews.

FINAL ACTIONS FY 2019**Licenses Issued in Fiscal Year 2019**

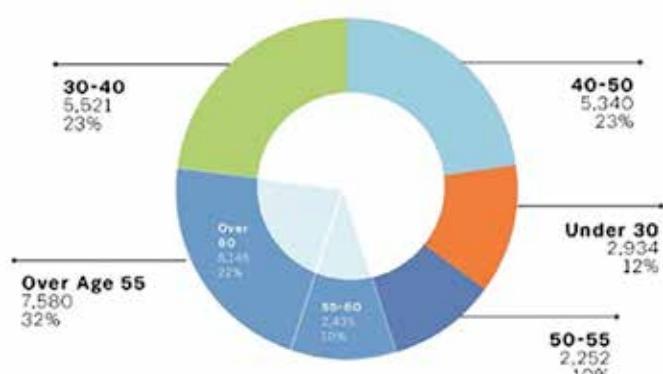
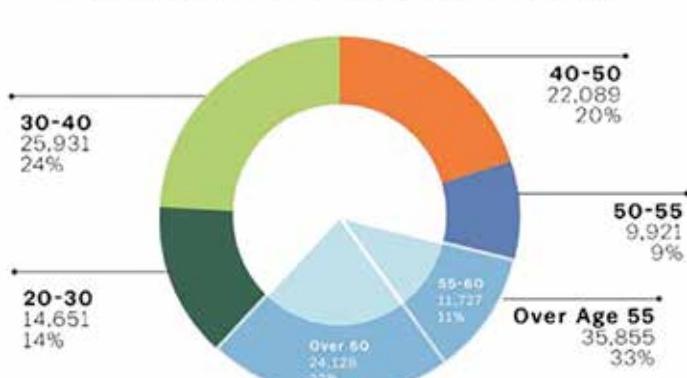
	Registered Nurse	Licensed Practical Nurse
Licensure by Examination (includes nurses not educated in Missouri)	4,169	1,129
Licensure by Endorsement	2,321	224
Licensure by Renewal of a Lapsed or Inactive License	1,165	409
Number of Nurses holding a current nursing license in Missouri as of 6/30/2019	108,447	23,612

There were 1,313 new Advanced Practice Registered Nurse applications approved in fiscal year 2019.

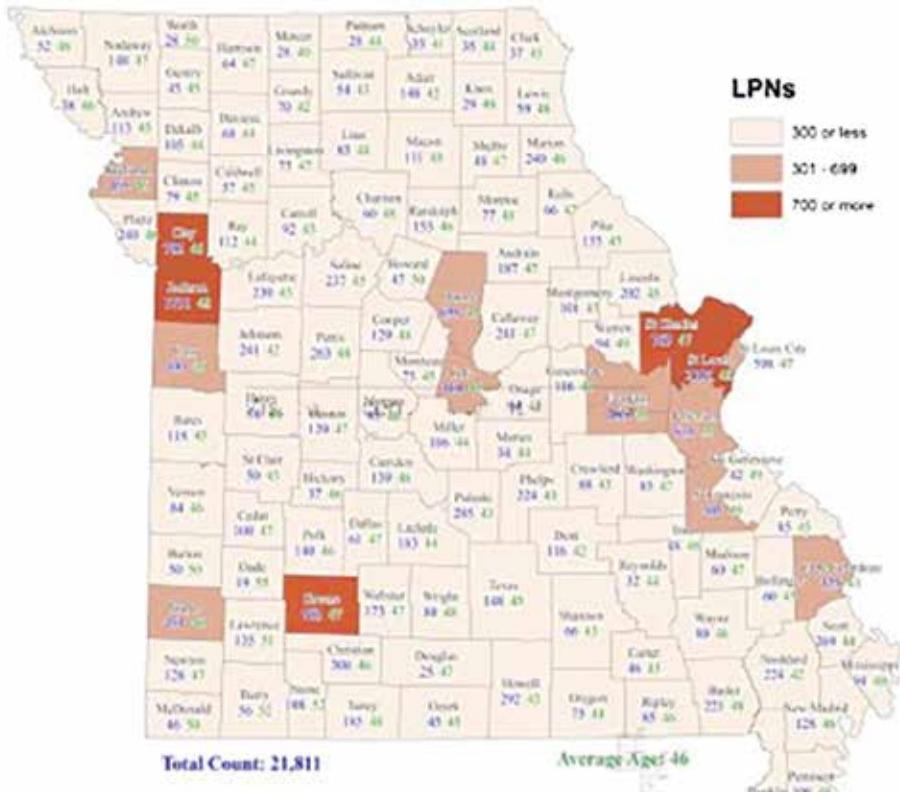
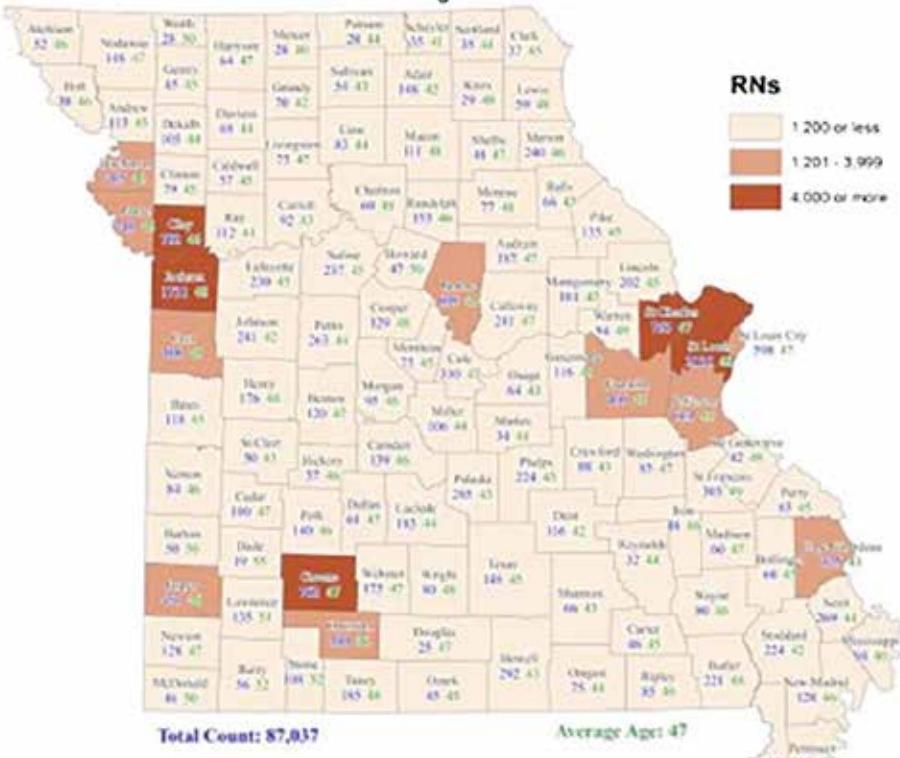
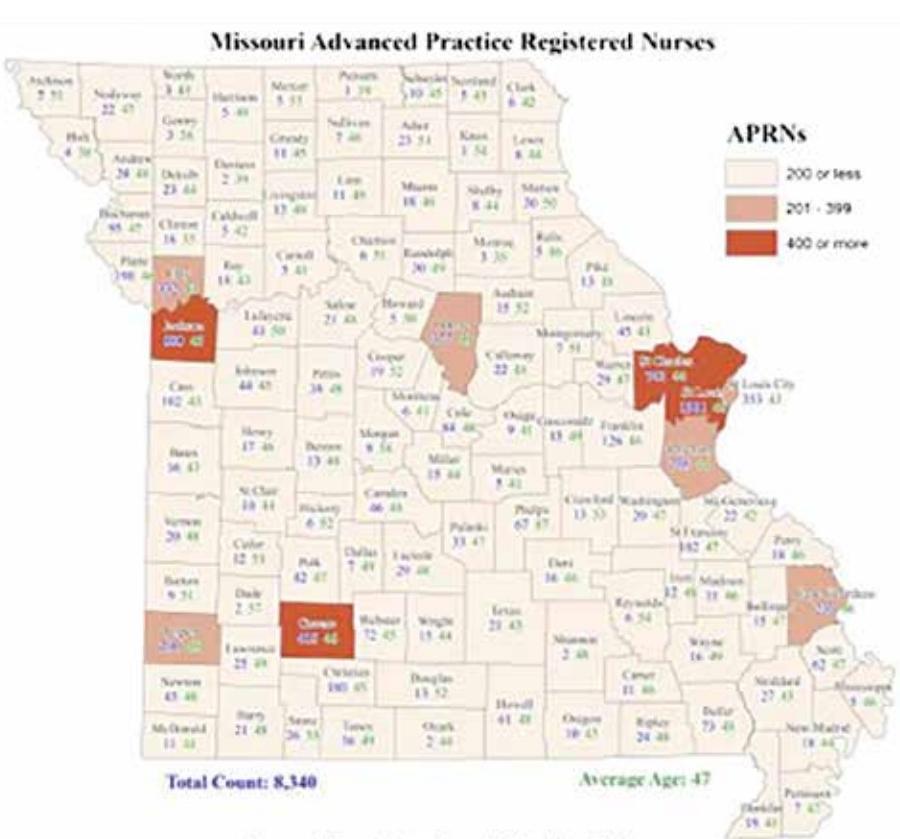
The Board granted 349 nurses advanced prescriptive authority in fiscal year 2019. There are currently 2,200 Advanced Practice Registered Nurses with controlled substance prescriptive authority.

Age Distribution

The board continues to keep a close eye on the age distribution of nurses as many are at or near retirement.

LICENSED PRACTICAL NURSES AGE DISTRIBUTION**REGISTERED NURSE AGE DISTRIBUTION**

The following three maps depict the average age of nurses by county and the number of nurses in each county who had a current Missouri nursing license and Missouri primary address as of July 1, 2018. The average age on the following maps is the average age of nurses that reported Missouri primary residence.

Missouri Licensed Practical Nurses**Missouri Registered Nurses****Missouri Advanced Practice Registered Nurses**

NCSBN Nursys e-Notify Database Reaches Milestone of One Millionth Nurse Enrolled

CHICAGO – The NCSBN Nursys e-Notify database has reached the milestone of enrolling one million nurses by institutions. Powered by U.S. nursing regulatory bodies (NRBs), Nursys is the only national database for verification of nurse licensure, publicly available discipline and practice privileges for registered nurses, licensed practical/vocational nurses and advanced practice registered nurses provided directly by participating NRBs and designated by them to be primary source equivalent.

The mission of NRBs is to protect the public's health and welfare by overseeing and ensuring the safe practice of nursing. NRBs achieve this mission by outlining the standards for safe nursing care and issuing licenses to practice nursing. They monitor licensees' compliance to jurisdictional laws and when necessary take action against the licenses of those nurses who have exhibited unsafe nursing practice.

"This public protection service was envisioned by NCSBN Member NRBs several years ago with support from the NCSBN Board of Directors and NCSBN management. We are extremely pleased to be celebrating the success of their vision," comments Nur Rajwany, MS, NCSBN chief information officer.

With the Nursys e-Notify system, institutions that employ nurses or maintain a registry of nurses, now have the ability to receive automatic licensure, publicly available discipline and practice privileges notifications quickly, easily, securely and free of charge.

Institutions do not have to proactively seek licensure or publicly available discipline information about their nurses because that information will be sent to them automatically. This data include nurse licensure expirations, upcoming renewals and any public discipline action from the organization's jurisdiction and others. Learn more, watch a video demo, or enroll for this free service as an institution at www.nursys.com/e-notify and select "As an Institution."

Individual nurses can also benefit from self-enrollment in e-Notify. In just a few minutes, nurses can self-enroll into and receive licensure status updates, and create and manage multiple license expiration reminders. Keeping on top of license status can help nurses prevent fraudulent licenses or certificates being issued in their names. Creating an account is free, quick and easy. Self-enroll at www.nursys.com/e-notify and select "As a Nurse" to complete the registration process.

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Moments with Marcus



Nurses on Lockdown

By Marcus Engel

As I write, the last part of Hurricane Dorian has made its trek all the way to Canada. For more than a week, all of us in Florida have been glued to the TV, hoping we wouldn't face the storm's destruction. We also spent a lot of time praying for the Bahamas and all the others devastated by this monster. Florida dodged a bullet; other parts of the world weren't so lucky.

When major disasters like this are eminent, you have to pull out all the stops. Everything has to be covered: police and EMS, power workers, hospital personnel - everything. And so, as we sat and waited for the storm to come, my family didn't seem complete. That's because my stepdaughter, Taylor, and my daughter-in-law, Alexis, both nurses, were called into their hospitals to go on lockdown. Each ultimately spent four full days in the hospital. Working, yes, and also sleeping on exam tables in clinics or the floor in the break room, sharing the limited showering facilities with a few hundred of their closest friends, living off cafeteria food and vending machines, and being absent from family for the better part of a week.

Not sure about you, but I love my creature comforts of home. My bed, my food, my routine, my free time. Isn't



Marcus Engel

that all of us? Same with Taylor and Lexi and all their co-workers. But, when stuff was about to hit the fan, each packed a couple overnight bags and checked into the hospital. As they left, and with the storm so unpredictable, I had a tinge of fear in my gut for their safety... but that was replaced with so, so much pride for the way each has given herself to this sacred work of nursing.

While the nurses in my family will say, loud and proud, they love the overtime, the truth is, they love nursing. Yes, money is nice. And necessary. And all our heroes deserve to be compensated. Money makes the world go around, after all. Well, that and magnetic rotations and gravitational forces. Most all nurses I know didn't become nurses strictly for the paycheck. *Nursing is a calling.* It's a constant tug to try to help better the world by easing suffering, one patient at a time. Yes, there's opportunity in this work for advancement and bigger pay, as there should be. But I'll bet you a new dime that most nurses don't talk about their work in terms of dollars. They talk about the people. They talk about the "thank you" from patients and families. They talk about how, at the end of the shift, as tired as they are, they're ready to come back soon and do it all over. This is the nature of nursing. It's a call you have chosen to follow, too.

A calling is born inside a person. Calling is commitment. Calling is a gut driving force to be a positive change agent in this world. That is you. And that is also the mindset of those in my family. Thank you for listening to that calling and stepping into your role in this sacred work.



MOVING FROM...

Noncompact → Compact:

Compact → Noncompact:

Compact → Compact:

Another Country (International Nurses)

Definition:

MOVING TO ANOTHER STATE

The nurse is responsible for applying for licensure by endorsement in the new state of residence. The nurse may apply before or after the move. A multistate license may be issued if residency and eligibility requirements are met. If the nurse holds a single state license issued by the noncompact state, it is not affected.

The nurse is responsible for applying for licensure by endorsement in the new state of residence. The nurse may apply before or after the move. The multistate license of the former NLC state is changed to a single state license upon changing legal residency to a noncompact state. The nurse is responsible for notifying the board of nursing (BON) of the former NLC state of the new address.

When moving (changing primary state of legal residence) to a new NLC state, it is the nurse's responsibility to apply for licensure by endorsement. This should be completed upon moving and the nurse should not delay. There is no grace period. The nurse may not wait until the former license expires to apply in the nurse's new state of legal residency. The nurse may practice on the former home state license only UNTIL the multistate license in the new NLC home state is issued. Proof of residency such as a driver's license may be required. Upon issuance of a new multistate license, the former license is inactivated.

If a nurse on a visa from another country applies for licensure in a compact state, the nurse is responsible for either declaring the country of origin or the compact state as their primary state of residency. If the foreign country is declared the primary state of residency, the nurse may be eligible for a single state license issued by the compact state.

Primary State of Residence (PSOR):

The state (also known as the home state) in which a nurse declares a primary residence for legal purposes. Sources used to verify a nurse's primary residence may include driver's license, federal income tax return or voter registration. PSOR refers to legal residency status and does not pertain to home or property ownership. Only one state can be identified as the primary state of legal residence for NLC purposes.

NCSBN Elects New Members to its Board of Directors and Leadership Succession Committee

CHICAGO – NCSBN Board of Directors President Julia George, MSN, RN, FRE, executive director, North Carolina Board of Nursing, announces new members of the NCSBN Board of Directors who were elected during the 2019 Delegate Assembly, held in Chicago, Aug. 21-23, 2019.

Those elected include:

Treasurer

Adrian Guerrero, CPM, director of operations, Kansas State Board of Nursing, was elected Treasurer. He previously served as Area II director from 2017-19. He also served as chair of the Nursys Committee and as a member of both the Fraud Detection Committee and the Nursys Advisory Panel.

Area I Director

Cynthia LaBonde, MN, RN, executive director, Wyoming State Board of Nursing, was reelected Area I director.

Area II Director

Lori Scheidt, MBA-HCM, executive director, Missouri State Board of Nursing, was elected Area II director. She previously served as director-at-large from 2016-19. She also served as chair of the Fraud Detection Committee and Member Board Agreement Review Committee, and on the Nurse Licensure Compact (NLC) Administrators Executive Committee.

Area III Director

Jay P. Douglas, MSM, RN, CSAC, FRE, executive director, Virginia Board of Nursing, was elected Area III director. She was previously appointed to fill an unexpired term as Area III director in 2018. She also served as director-at-large on the NLC Administrator Executive Committee and vice chair of the Interstate Commission of NLC Administrators from 2017-2018.

Area IV Director

Valerie J. Fuller, PhD, DNP, AGACNP-BC, FNP-BC, FAANP, FNAP, board president, Maine State Board of Nursing, was reelected Area IV director. She previously served as chair of the APRN Education Committee and as a member of the Advanced Practice Committee and the APRN Distance Learning Education Committee.

Director-at-Large

Anne Coghlan, MScN, RN, executive director and CEO, College of Nurses of Ontario, was appointed by the NCSBN Board of Directors (BOD) to fill the vacancy created by the election of Scheidt.

NCSBN delegates also elected members of the Leadership Succession Committee (LSC):

Area I Member – Gretchen Koch, MSN, RN, policy analyst, Oregon State Board of Nursing

Area III Member – Sara Griffith, MSN, RN, regulation consultant, North Carolina Board of Nursing

The NCSBN BOD also appointed Member-at-Large positions to the LSC:

Shirley Brekken, MS, RN, FAAN, executive officer, Minnesota Board of Nursing

Greg Kohn, MM, board member, Wyoming State Board of Nursing

Sherry Richardson, MSN, RN, CMSRN, board staff, Tennessee State Board of Nursing

Full time position M-F 8am to 5pm for FNP-C with private practice Internal Medicine clinic also specializing in HIV care and clinical research currently transitioning to non-for profit.

Candidate should have minimum of 2 years of patient care in a clinical setting and experience and knowledge in HIV. Experience with clinical research trials a plus but not required. Must be accustomed working with a diverse patient population.

Salary based on experience, \$100,000 to \$150,000.

Benefits will be discussed at interview. Please email CV to jim.bilderback@centralwesthealthcare.clinic or fax to 314-735-4211.



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TWO COMPACTS COMPARED

A Driver's License Compact vs. a Nurse License Compact



1. Issued in your primary state of residence.
2. When driving in other states, you must know and obey that state's laws (rules of the road).
3. While driving in other states, if you violate the state's law, the state can remove your driving privileges in that state.
4. When you change your primary state of residence (move) to another compact state, you need to apply for that state's driver's license. You can drive on your former license for a certain number of days (depending on the state). The former license then becomes invalid.
5. While driving in other states, if you violate the state's laws and the state takes action (discipline), it is reported to the state that issued your license (where you reside). Most home states can take the same action as if you committed the violation in your home state.

1. Issued in your primary state of residence
2. When practicing in other states, you must know and obey that state's laws (Nurse Practice Act).
3. While practicing in other states, if you violate the state's laws, the state can remove your practice privileges in that state.
4. When you change your primary state of residence (move) to another compact state, you need to apply for that state's nursing license. You should apply immediately and not delay as there is no grace period. You can only practice on your former multistate license until you are issued your new multistate license from your new PSOR. The former license then becomes invalid.
5. While practicing in other states, if you violate the state's laws, and the state takes action (discipline), it is reported to the state that issued your license (where you reside). Most home states can take the same action as if you committed the violation in your home state.

RESOURCES

Websites: nursecompact.com
www.ncsbn.org/nlc

NLC and APRN Compact Advocacy Web page

NLC Toolkit: ncsbn.org/nlc-toolkit.htm

06/19

Some of the Organizations Supporting the NLC include:

Air & Surface Transport Nurses Association
American Academy of Ambulatory Care Nursing
American Association of Colleges of Nursing
American Association of Neuroscience Nurses
American Association of Occupational Health Nurses (AAOHN)
American Association of Poison Control Centers
American Nephrology Nurses Association
American Organization of Nurse Executives (AONE)
American Telemedicine Association (ATA)
Association of Camp Nurses
Association for Vascular Access
Case Management Society of America (CMSA)
Center for Telehealth and E-Health Law
Citizen Advocacy Center (CAC)
Commission for Case Manager Certification
Emergency Nurses Association (ENA)
Health IT Now
National Military Family Association
National Governors Association Center for Best Practices
National Patient Safety Foundation
Population Health Alliance
Telehealth Leadership Council
U.S. Department of Commerce

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Highlights of Fiscal Year 2019

The mission of the Missouri State Board of Nursing is to protect the public's health and safety through regulation of nursing education, licensure, and practice. In FY2019, the Board worked diligently to improve services and strengthen programs for public protection. Highlights of the Board's work are listed below:

Education:

- To date, 41 individuals from the **Air Force Nursing Services Practical Nurse (PN) Training Program – Basic Medical Technician Corpsman Program (BMTCP) 4N051/4N071 (4N training program)** have been licensed as LPNs.
- The Missouri State Board of Nursing (Board) convened a Military Advisory Panel. The panel comprises 14 members who actively serve in the armed forces, nurse educators and practice partners who are ready to lend their expertise to foster implementation of optimal pathways to optimally utilize military education, training and service to gain academic eligibility to apply for nurse licensure in Missouri.
- On May 22, 2019 the Missouri State Board of Nursing hosted a meeting with Air Force officials representing command staff for the Air Force nursing service. This meeting was conducted as part of the Board's ongoing commitment to foster academic pathways for members of the armed forces to work towards licensure as a nurse.
- The Board provided funded professional nursing programs under the **Board's Nursing Education Incentive Program**. The State of Missouri established, through legislative action and appropriation of funds, the "Nursing Education Incentive Program" in order to increase the physical and educational capacity of nursing education programs in Missouri. In 2019 the Board of Nursing awarded \$777,462 to eligible nursing schools. Since inception of incentive funding in 2011 Missouri nursing programs have received a total **\$6,111,455**.
- This year's Innovative Best Practice (IBP) in Nursing Education Conference April 5, 2019 was co-sponsored by the Missouri State Board of Nursing with State Fair Community College. There were 141 nurse educators from all levels of nursing education present. The Workshop was offered free of charge to all attendees. Objectives for this year's Conference were centered around active learning strategies, clinical simulation and student engagement in on-line learning.

Compliance

- Two different types of **alternative to discipline programs** to remove impaired nurses from practice in a more timely fashion and increase public protection were implemented. In FY2019, 27 licensees entered the Intervention Program and 10 licensees entered the Alternative Program. In FY 2019, five individuals violated the terms of the Intervention Program and one individual violated the terms of the Alternative Program.
- The Board held committee meetings every two weeks followed by full board mail ballots to ensure timely resolution of complaints. **Twenty Consumer Protection Conference Calls were held in FY2018**.

Investigations

- The average number of days to complete an investigation was 41 days.

Legal

- The Board employs three attorney team members with a combined 47 years' experience.
- The Board experienced a decline in performance and increase in contract costs in 2019 due to vacancies. Lack of competitive pay impacts the Board's ability to carry out its mission:

	Performance Improvement with In-House Attorneys and Paralegals Comparing 2008 to 2019		
	2008	2019	Change
Board Decisions	1,605	1,760	9% increase
Board Hearings	106	147	28% increase
RNs Licensed	87,798	108,447	19% increase
LPNs Licensed	24,646	23,612	4% decrease
Contract Attorney Fees	\$184,143.32	\$75,544.25	59% reduction
Calendar Days to Complete a Case: From Receipt of Complaint to Final Resolution	284	131	54% improvement

Licensure

- The average number of days to issue a temporary permit to Registered Nurses was **6.77 calendar days** and for Licensed Practical Nurses was **7.11 calendar days**.
- In FY2019, the board of nursing changed licensure applications to require evidence of lawful presence in order to comply with 8 U.S.C.A. §1621, which requires evidence of lawful presence prior to granting a professional license. This has increased the application processing time.
- Answered **52,374 telephone calls**.
- Revised all instruction letters and applications for licensure to ensure that the process was streamlined and easily understood by applicants.
- Continued to use [Nursys.com](#) for license verification purposes. This improves customer service because nurses can request verifications online 24 hours a day and verifications are immediately available. Utilization of [Nursys.com](#) also strengthens our fraud prevention efforts. A total of **6,515** of Missouri nurses requested that their Missouri license be verified to another state and **3,465** nurses licensed in other states requested verification into Missouri.
- Continued to urge nurses and employers to enroll in Nursys e-Notify for many reasons. Enrollment in this system alerts the institution and/or nurse before a license expires and when it expires. Alerts are sent to the enrollee any time any discipline is attached to the enrolled license. For a nurse enrollee, this system can help prevent any fraudulent licenses or certificates being issued in the nurse's name. Missouri is a member of the nurse licensure compact. A multi-state license is tied to the nurse's primary state of residence. A change to a nurse's primary state of residence could change the multi-state license status. This system will notify the enrollee if that status changes. When a nurse submits a license renewal online, the license is not automatically renewed. This system notifies the enrollee when the license is renewed. This system pushes notification of changes to the enrollee rather than having to continually re-query the system. A total of **1,214 institutions accounting for 105,846 nurses** were enrolled in the institution e-Notify. A total of **134,197 (87.9%) of Missouri-licensed nurses** were enrolled in nurse e-Notify.

Workforce

- Added the workforce data elements to Nursys e-Notify so workforce related information can be provided by the nurse during license renewal. This information is used for the purposes of nursing workforce research. A total of **134,197 (87.9%) of Missouri-licensed nurses** were enrolled in Nursys e-Notify.

Operations

- 91% of nurses, 100% of employers, and 100% of nurse educators** in Missouri indicated the timeliness of the response on an email inquiry as excellent or good.

Leadership

Bibi Schultz, Director of Education

- NCSBN Nursing Education Outcomes and Metrics Committee. Terms runs September 2016 through August 2018.

Lori Scheidt, Executive Director

- Re-elected to the National Council of State Boards of Nursing's (NCSBN) Board of Directors for a two year term that began August 2018.
- Presented at a national conference on fraud detection.
- Served as a member Nurse Licensure Compact Compliance Committee.

Practice

- The practice section performed **25 presentations** about the Missouri Nurse Practice Act and the Board of Nursing. Of those, 13 presentations were to schools of nursing, one was to a community RN group, five were to school nurse groups, five were APRN related groups and one to a Department of Mental Health group.
- Continued to provide timely in-person responses to hundreds of email and phone inquiries.
- Continued to build and reinforce relationships with other health care related state agencies and associations/organizations.

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Stop the Bleed

By Lori Scheidt, Executive Director

On an early Sunday afternoon, I was summoned to Kansas City to rescue a family member who was having vehicle issues. I did my good deed and was on my way back home via I-70 East. My unexpected trip turned out to be one of those life lessons. I witnessed a motor vehicle accident (MVA). It was a horrific roll-over accident.

Like many of us, it isn't unusual to drive by a MVA; however, this is the first time I actually witnessed one that was this traumatic. Because I was first on the scene, I made the decision to pull over and see if I could be of assistance.

I had enough sense to quickly look at the mile marker to orientate myself to the location in order to relay that information to first responders. As I was approaching the vehicle, I saw a person with a cell phone to his ear and confirmed that he had already called for help. I could hear a female in distress and quickly realized she was the passenger. The vehicle had come to a stop on its top. I ran to the passenger side and saw a female who was bleeding profusely from her upper arm. At this point, there were several bystanders at the side of the road. I relayed that I needed something to apply pressure to what I thought was a severe gash in her upper arm. Someone handed me a child's coat. When I applied it, I quickly realized she had an arterial bleed. I knew I needed something else to try to fashion a tourniquet. I again sought the assistance of bystanders who handed me jogging pants that were in the wrecked vehicle. I tied the pants as tight as I could around her upper arm, above the bleed. I knew I needed something sturdier. Thankfully, a man appeared and identified himself as an off-duty EMT. I quickly told him the situation and that we needed a tourniquet. He sacrificed his belt to make a better tourniquet. I held her hand while the EMT applied the tourniquet which was much better than my attempt. I left when EMS arrived and took over.

The following day, I heard from the passenger's family. They said that the first hospital didn't think they could save her arm, but were confident another hospital had a surgeon with the necessary skills that could. After a multiple-hour surgery, her arm was saved. She had over 100 internal stitches, staples and a wound vac. They were told she might not have survived due to blood loss if not for the help she received on scene.

As I shared this story, one of our former board members, Autumn Bliss, and long-time colleague, Desma Reno, told me about the "Stop the Bleed" campaign. I was intrigued.

I believe I was put in that situation for a reason. I had never planned to go to Kansas City that day. On the way home, I thought about stopping several times, but for some reason I didn't. I stopped at the MVA, when normally I don't. I made the conscious decision to assist and came into contact with blood while ungloved, which I normally would not do. I felt it was life or death situation.

As I reflect on that day, I saw many on the side of the road who looked distressed and upset and probably would have helped had they known what to do. Many stopped but only two of us were willing to save a life.

"Stop the Bleed" <https://www.dhs.gov/stopthebleed> is a national awareness campaign and call-to-action intended to cultivate grassroots efforts that encourage bystanders to become trained, equipped, and empowered to help in a bleeding emergency before professional help arrives. I encourage you to visit their web site to see how you can help.

We have made plans to train team members in our division. I am also working with some community partners to provide training to community members in my small hometown.

My final reflection is this experience makes me humble and proud to work with all of you that have done or still do this without blinking an eye. Thank you.

NCSBN Award Ceremony Honors Outstanding Nurse Regulators

CHICAGO – NCSBN recognized its dedicated and exceptional membership and guests at its annual awards ceremony during the NCSBN Annual Meeting and Delegate Assembly, held in Chicago, Aug. 21-23, 2019.

Specific award recipients include:

Elizabeth Lund, MSN, RN, executive director, Tennessee State Board of Nursing, was honored with the prestigious R. Louise McManus Award. Individuals receiving this award have made sustained and significant contributions through the highest commitment and dedication to the mission and vision of NCSBN.

Fred Knight, JD, board staff, Arkansas State Board of Nursing, received the Meritorious Service Award, which is granted to a member for significant contributions to the mission and vision of NCSBN.

Ingeborg "Bibi" Schultz, MSN, RN, CNE, board staff, Missouri State Board of Nursing, received the Exceptional Contribution Award, which is given for significant contribution by a member who is not a president or executive officer and demonstrated support of NCSBN's mission.

The **Alabama Board of Nursing** was awarded the Regulatory Achievement Award that recognizes the member board or associate member that has made an identifiable, significant contribution to the mission and vision of NCSBN in promoting public policy related to the safe and effective practice of nursing in the interest of public welfare.

In addition, service awards were given to the following executive officers of nursing regulatory bodies (NRBs):

Five Years

- Margaret Cooke, PhD, RN, RM, executive officer, Nursing and Midwifery Council of New South Wales
- Ruby Jason, MSN, RN, NEA-BC, executive director, Oregon State Board of Nursing
- Tanya Vogt, executive officer, Nursing and Midwifery Board of Australia

10 Years

- Anne Coghlan, MScN, RN, executive director & CEO, College of Nurses of Ontario

20 Years

- Shirley Brekken, MS, RN, executive director, Minnesota Board of Nursing



Bibi Schultz, Missouri State Board of Nursing Director of Education

- Kimberly Glazier, MEd, RN, executive director, Oklahoma Board of Nursing

About NCSBN

Founded March 15, 1978, as an independent not-for-profit organization, NCSBN was initially created to lessen the burdens of state governments and bring together nursing regulatory bodies (NRBs) to act and counsel together on matters of common interest. It has evolved into one of the leading voices of regulation across the world.

NCSBN's membership is comprised of the NRBs in the 50 states, the District of Columbia, and four U.S. territories — American Samoa, Guam, Northern Mariana Islands and the Virgin Islands. There are three exam user members. There are also 27 associate members that are either NRBs or empowered regulatory authorities from other countries or territories.

Mission: NCSBN provides education, service and research through collaborative leadership to promote evidence-based regulatory excellence for patient safety and public protection.

The statements and opinions expressed are those of NCSBN and not individual members.



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2019 Golden Awards

We are happy to announce that *Golden Certificates* were recently sent to 282 Registered Nurses and 46 Licensed Practical Nurses. These individuals have been licensed in the State of Missouri for 50 years. We take great pleasure in marking this special achievement in the fourteenth year of our Golden Award Recognition program. A list of those receiving Golden Certificates follows.

LPN Barbara A Quick	Holts Summit	MO	RN Linda M Kriegermeier	St Charles	MO	RN Jeannine A Wright	Independence	MO
LPN Kathleen E Laforte	Humansville	MO	RN Susie D Waechter	Mexico	MO	RN Evelyn L Wilson	Novinger	MO
LPN Joyce U Bruton	Republic	MO	RN Thelma L Chapman	Ballwin	MO	RN Gaye V Quaranto	Macon	MO
LPN Shirley K Bauche	Maryland Heights	MO	RN Janice M Norton	Gladstone	MO	RN Andrea K Smith	Webster Groves	MO
LPN Mary G Horton	Chula	MO	RN Mary P Cohen Ehlen	Ballwin	MO	RN Patricia A Lough	Des Peres	MO
LPN Roberta L Norman	Columbia	MO	RN Constance D Mason	Saint Peters	MO	RN Mary E Hetenyi	Kirkwood	MO
LPN Louise S Welch	Florissant	MO	RN Lois Dorothy Clendening	Grain Valley	MO	RN Patricia K Cook	Pacific	MO
LPN Laura M Moore	Tebbetts	MO	RN Linda H Ruhs	Springfield	MO	RN Ursula N Shaner	St. Louis	MO
LPN Kizzie L Garrett	Kansas City	MO	RN Katherine B Server	Excelsior Springs	MO	RN Carolyn R Randall	Monett	MO
LPN Jean I Coney	Independence	MO	RN Bonnie J Downs	Leawood	KS	RN Barbara T Wiman	Olathe	KS
LPN Kathleen Watson	Eolia	MO	RN Robert H McCoy	Florissant	MO	RN Susanann Schwend Lieber	Saint Louis	MO
LPN Bonnie K Oltmer	Oak Grove	MO	RN Carol I McDaniel	Saint Charles	MO	RN Mary H Brice	Saint Louis	MO
LPN Linda C Johnson	Saint Joseph	MO	RN Carol Baltz	Independence	MO	RN Carol A Roeder	Ballwin	MO
LPN Barbara J Majeski	St Joseph	MO	RN Ellen B Rensch	Florssnt	MO	RN Emily A Frazier	Columbia	MO
LPN Joyce E Coffey	Saint Joseph	MO	RN Catharine D Carpenter	Quincy	IL	RN Nancy A Valko	Saint Louis	MO
LPN Judy Black-O'Connor	Rolla	MO	RN Therese M Abbenhaus	Saint Louis	MO	RN Jane Flanagan	Saint Louis	MO
LPN Charlotte Redding-Shaw	Florissant	MO	RN Kathleen M Potts	Saint Louis	MO	RN Mary A. Martin	Jackson	MO
LPN Willie T Jamerson	Kansas City	MO	RN Suzanne Wesley	Saint Louis	MO	RN Mary P Burson	Blue Springs	MO
LPN Iris F Elliott	Independence	MO	RN Ruth Bax-Edwards	Liberty	MO	RN Carol E Lyon	Overland Park	KS
LPN Barbara M Hedrick	Eolia	MO	RN Suzanne M Cram	Las Vegas	NV	RN Patricia L Taylor	Lee's Summit	MO
LPN Ronald Steen	Oak Grove	MO	RN Paula L Goerss	Florissant	MO	RN Lavina M Forgue	Kansas City	MO
LPN Ann C Long	Saint Joseph	MO	RN Patricia S Overman	Liberty	MO	RN Isa J Laury	Wentzville	MO
LPN Brenda K Folkert	St Joseph	MO	RN Linda L Gericke	Kansas City	MO	RN Joan K Feise	Ballwin	MO
LPN Linda S Eddington	MO	MO	RN Mamie L Walton	Saint Ann	MO	RN Barbara J McDowell	Lake St Louis	MO
LPN Beverly J Marrant	Excelsior Springs	MO	RN Joice Westfall-Hollingsworth	Saint Louis	MO	RN Joanne K Reuter	O Fallon	MO
LPN Janette M McMullen	Independence	MO	RN Roberta Gurley	Saint Louis	MO	RN Kathryn E Briscoe	Saint Charles	MO
LPN Luverne I Crosby	Anderson	MO	RN Brenda L Walker	University City	MO	RN Cheryl L Spiegelhalter	Concordia	MO
LPN Judith A Thomas	Imperial	MO	RN Doris A Burks	Florissant	MO	RN Cheryl J Sullins	Raytown	MO
LPN Paula C Gullett	Williamsville	MO	RN Carol J Eisenbraun	Smithville	MO	RN Joyce C Dunlop	Saint Charles	MO
LPN Sharon A Mann	Marshfield	MO	RN Karen G King	Shawnee Mission	KS	RN Bonnie C Daniels	Kansas City	MO
LPN Glenda C Emhoff	Fair Grove	MO	RN Lyn D Pepper	Weston	MO	RN Gail M Brown	Clinton	MO
LPN Linda M Cansler	Desoto	MO	RN Barbara J Hall	Laurie	MO	RN Valerie B Weaver	Stockton	MO
LPN Nancy L Robbins	Hannibal	MO	RN Jan M Hassien	Holts Summit	MO	RN Cheryl A Fellinger	Kansas City	MO
LPN Cadelia Agnes Gray	Excelsior Springs	MO	RN Donna S Short	Rich Hill	MO	RN Jane B Campbell	Kansas City	MO
LPN Marylyn S Hilton	Independence	MO	RN Carolyn M Kuelker	Florissant	MO	RN Linda D Tarry	Lees Summit	MO
LPN Sharon C Ramsey	Anderson	MO	RN Ann L Thomas	Saint Louis	MO	RN Candace H Woehr	Westphalia	MO
LPN Linda D Clark	Imperial	MO	RN Eva P Mccoy	Urich	MO	RN Mary F Ott	Chesterfield	MO
LPN Isabelle B McHenry	Williamsville	MO	RN Annie G Strong	Florissant	MO	RN Nora E Landsbaum	Olathe	KS
LPN Patricia A Wilson	Marshfield	MO	RN Joanne M Gordon	Millcreek	UT	RN Sharlene F Rhoads	Raymore	MO
LPN Nancy R Buffa	Fair Grove	MO	RN Jane F Henthorn	O Fallon	MO	RN Margaret A Ritter	Kansas City	MO
LPN Janice S Kane	Bolivar	MO	RN Sandra J Eckert	Saint Louis	MO	RN Carrie A Pike	Columbia	MO
LPN Patricia J Murphy	Cassville	MO	RN Cindy Lou Rogger	Effingham	IL	RN Billie F Vardiman	Marshall	MO
LPN Judy C Winter	Ozark	MO	RN Kathleen A Aldenderfer	Hazelwood	MO	RN Carol C Beesley	Leawood	KS
LPN Elizabeth K Loporto	Aurora	MO	RN Doris E Voegtle	Saint Louis	MO	RN Brenda A Ganim	Saint Louis	MO
LPN Christine Overmann	Saint Joseph	MO	RN Mary T Hellige	Kirkwood	MO	RN Kathleen K Franklin	O Fallon	MO
LPN Sarah J Boyd	Odessa	MO	RN Veronica R Kersting	Hunnewell	MO	RN Eileen Rosenkoetter	Saint Louis	MO
RN Nita A Fitchpatrick	Florissant	MO	RN Arlene C Klostermann	Saint Louis	MO	RN Karl H Rethemeyer	Saint Peters	MO
	Florissant	MO	RN Theresa A Miyamoto	Aica	HI	RN Jean W Ray	Fenton	MO
	Saint Louis	MO	RN Susan M Garrett	Wildwood	MO	RN Jennifer C Renner	Blue Springs	MO
	Lee's Summit	MO	RN Donna J Unterreiner	Kirkwood	MO	RN Patricia B Sullwold	St Joseph	MO
	Arrow Rock	MO	RN E Kay Gilliland	Lee's Summit	MO	RN Merylis J Medlicott	Carthage	MO
	St Peters	MO	RN Thelma S Sword	Independence	MO	RN Leslie A Smith	Grain Valley	MO
	Waterloo	IL	RN Margaret L Adams	Independence	MO	RN Barbara J French	Gladstone	MO
	Chesterfield	MO	RN Phyllis A Springston	Slater	MO	RN Judith L Willhite	Fair Grove	MO
	Fenton	MO	RN Kathleen G Revell	Liberty	MO	RN Thelma J Lewis	Florissant	MO
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RN Janene W Ford	Henley	MO	RN Mary E Dunkel	Mount Carmel	IL	RN Patricia J Hayes	Olathe	KS
RN Edna M Schieber	Wellington	MO	RN Linda P Heller	Arnold	MO	RN Bettie L Gross	Urich	MO
RN Helen J Black	Columbia	MO	RN Marilee Kuhrik	Ballwin	MO	RN Linda K Aleksaites	Roeland Park	KS
RN Nancy J Kinker	Ellisville	MO	RN Carol S Lussky	Chesterfield	MO	RN Linda Sue Kimble	Brookfield	MO
RN Bertha Carter-Simmons	Florissant	MO	RN Susan L Solomon	Washington	MO	RN Patricia A Houdart	Kansas City	MO
RN Wanda D Trotter	Florissant	MO	RN Ann L Dace	Sullivan	MO	RN Sherry F Zimmerman	Grain Valley	MO
RN Alice F Deskins	Lees Summit	MO	RN Cheryl A Green	Saint Louis	MO	RN Sandra A Ems	Pevely	MO
RN Terry T Gilmore-Walker	Rock Hill	MO	RN Janet P Ocheskey	Hermann	MO	RN Janet M Worley	Saint Louis	MO
RN Phyllis E Kirk	Saint Clair	MO	RN Margarette E Evers	Joplin	MO	RN Jacqueline O Scott	Saint Louis	MO
RN Judith L Wright	Potosi	MO	RN Beverly A Leirer	Desloge	MO	RN Kathleen H Cornish	Independence	MO
RN Earline A Carey	Saint Louis	MO	RN La Donna K Hager	Desloge	MO	RN Judith A Molloy	Estero	FL
RN Pauline Mosley	Saint Louis	MO	RN Jacquelyn M Clement	Maryville	IL	RN Ellen M Alberding	High Ridge	MO
RN Brenda A Owens	Centreville	IL	RN Donna R Statler	Saint Louis	MO	RN Jo Ann C Friganza	St. Louis	MO
RN Jean A Owens	Durham	NC	RN Nancee W Rippetto	Wentzville	MO	RN Leslie C Lehman	Saint Louis	MO
RN Sheryl L Rose	Saint Louis	MO	RN Florence S Jeffreys	O'fallon	IL	RN Suzanne Massaro	Saint Louis	MO
RN Patricia Secrease	Perryville	MO	RN Carol A Tindira	Saint Louis	MO	RN Dorothy L Piontek	Springfield	MO
RN Ollie K Bohnert	Saint Louis	MO	RN Linda L Stevens	Overland	MO	RN Carol A Lindsay	Sebastian	FL
RN Sharon E Ritter	St Charles	MO	RN Ann E Rakonick	Dardenne Prairie	MO	RN Luz R Floro	Creve Coeur	MO
RN Jessie F Krause	Fairview Heights	IL	RN Brenda L Schaefer	Saint Louis	MO	RN Janice A Myers	Kansas City	MO
RN Barbara J Delhougne	Chesterfield	MO	RN Gayle M Lutz	New Haven	MO	RN Sheila A Ebers	Center	MO
RN Mary K Thrower	Saint Louis	MO	RN Stephanie A Koenig	Florissant	MO	RN Georgia A Anderson	Columbia	MO
RN Lynn S Albus	Saint Louis	MO	RN Janice K Moormann	Saint Louis	MO	RN Linda L Fagan	Florissant	MO
RN Sandra M Bader	Springfield	MO	RN Mary Ann Hampton	Saint Louis	MO	RN Pamela J Harig	Saint Louis	MO
RN Charlotte A Quarles	Springfield	MO	RN Rosemary E Newman	Joplin	MO	RN Karen S Moore	Saint Charles	MO
RN Carol A Yonkman	Columbia	MO	RN Anita K Turnbull	Jefferson City	MO	RN Wanda L Eldringhoff	Rhineland	MO
RN Marilyn Z Wright	Mount Vernon	MO	RN Mary L Young	Saint Louis	MO	RN Nancy B Quigley	Saint Louis	MO
RN Sherry L Matthews	Springfield	MO	RN Dianne L Bingel	Saint Louis	MO	RN Sara M Ryan	Lees Summit	MO
RN Lennetta L Pearman	Kansas City	MO	RN Barbara J Hartung	Saint Louis	MO	RN Stachia M Wiegand	Kahoka	MO
RN Karen L Kane	Laurie	MO	RN Kathleen L Komorech	Saint Louis	MO	RN Jean A Bachman	Chesterfield	MO
RN Cynthia G Rowland	Jefferson City	MO	RN Virginia A Fischer	Saint Louis	MO	RN Shirley A Brown	Rogersville	MO
RN Patricia K Moore	Independence	MO	RN Roxie A Bunk	Palmyra	MO	RN Linda E Maechling	St Charles	MO
RN Mary D Hooker	Jefferson City	MO	RN Janet W Streckfuss	Sainte Genevieve	MO	RN Patricia T Stewart-Ringwal	Lake St Louis	MO
RN Marilyn S Cono	Kansas City	MO	RN Barbara S White	St Peters	MO	RN Dorothy Cheryl Compton	Lees Summit	MO
RN Kenneth L Bade	Overland Park	KS	RN Linda L Orsega	Saint Louis	MO	RN Helen E Bonneau-Kramer	Glasco	KS
RN Constance E Graham	Leawood	KS	RN Margaret L Barnett	Greenwood	MO	RN Jean D Knapstein	Saint Louis	MO
RN Margaret F Londal	Fenton	MO	RN Nettie L Agnew	Parkville	MO	RN Judith H Davidson	Kansas City	MO
RN Connie S Deibert	Blue Springs	MO	RN Dona A Paschall	West Plains	MO	RN Edna F Berry	Wellsville	MO
RN Yvonne J Ward Lakes	O'Fallon	MO	RN Donna L Husted	Republic	MO	RN Karen A Ellis	Columbia	MO
RN Sandra M Manuel-McIntyre	Saint Louis	MO	RN Joyce D Leuthart	Rolla	MO	RN Sandra K Furau	Knob Noster	MO
RN Margaret J Huffman	Branson	MO	RN Lavisa R Whiles	Springfield	MO	RN Wilma A Shimel	Independence	MO
RN Patricia L Codden	Saint Louis	MO	RN Mona K Ipsen	Cole Camp	MO	RN Catherine E Quinn	Jefferson City	MO
RN Mary H Mohr	Valley Park	MO	RN Sharon K Haight	Joplin	MO	RN Helen O Neal	Saint Louis	MO
RN Penelope L Fiedler	Saint Louis	MO	RN Sheral E Connor	Springfield	MO	RN Sandra L Howell	Saint Louis	MO
RN Patricia H Staley	Columbia	MO	RN Martha H Baker	Republic	MO	RN Deborah A Meyer	Cherry Valley	CA
RN Martha A Liston	Kansas City	MO	RN Phyllis J Stout	Sparta	MO	RN Leola M Hawkins	Saint Louis	MO
RN Sharon K Babbitt	Neosho	MO	RN Glenda M Knowles	Skiatook	OK	RN Diane Sindelar	St. Louis	MO
RN Mary Anne C Witten	Emporia	KS	RN Glenda W Miller	Marshfield	MO	RN Patricia A Peters	Washington	MO
RN Barbara J Diebold	Kelso	MO	RN Kathryn S Hadlock	Miller	MO	RN Barbara K Blaine	Shelbina	MO
RN Gail L Snyder	Liberty	MO	RN Faith Fuller	Springfield	MO	RN Marcia E Fagan	Smithville	MO
RN Linda J Lewis	Jackson	MO	RN Brenda W Tracy	Kidder	MO	RN Lisa Margaret Hotchkiss	Odessa	MO
RN Cynthia S Harvey	Wentzville	MO	RN Jane E Corzette	Meadville	MO	RN Sarah E Geldner	Fulton	MO
RN Virginia A Brown	Saint Louis	MO	RN Linda K Young	St Joseph	MO	RN Linda C McDowell	Kansas City	MO
RN Ruth W Craigmiles	Hannibal	MO	RN Charla K Felt	Wichita	KS	RN Nancy S Cunningham	Independence	MO
RN Katrena B Heter	St Charles	MO	RN Gwendolyn S Thoma	Jackson	MO	RN Janet S Mills	Nixa	MO
RN Laurel A Ruzas	St. Louis	MO	RN Linda L Wessel	Cape Girardeau	MO	RN Sharon Lee Jaske	Springfield	MO
			RN Jane L Herz	Saint Louis	MO			



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Disciplinary Actions**

Licensee admitted that she had taken Rocephin from the clinic and administered it to her husband at her residence. Licensee was not authorized by the facility to remove the Rocephin from the facility's inventory. At the time Licensee administered the Rocephin to her husband, he did not have a valid prescription for the drug. While meeting with facility supervising staff following the audit of patient S.M., Licensee did not deny taking the Rocephin.

Censure 06/12/2019

Ammatelli, Mary C

Kansas City, MO

Registered Nurse 093334

Licensee practiced nursing in Missouri without a license from May 1, 2017 to March 26, 2019.

Censure 07/05/2019

Harter, Kelsey Marie

Pittsfield, IL

Licensed Practical Nurse 2014042537

Licensee practiced nursing in Missouri without a license from June 1, 2018 to May 15, 2019.

Censure 07/23/2019

Kennedy-Nowicki, Elizabeth Marie

Wildwood, MO

Registered Nurse 2017032068

From October 10, 2017, until the filing of the Complaint, Respondent failed to check in with NTS on eleven (11) days and failed to check in within the required timeframe on four (4) days. In addition, on two (2) occasions, November 6, 2017, and March 11, 2019, Respondent reported to a lab and submitted the required sample which showed a low creatinine reading. On November 6, 2017, the low creatinine reading was 15.0. Respondent's creatinine reading was 18.1 for the March 11, 2019, sample. A creatinine reading below 20.0 is suspicious for a diluted sample and deemed a failed test.

Censure 07/10/2019

Dunham, Cheri L

Quincy, IL

Registered Nurse 2008028452

In or around October 2018, Licensee missed giving routinely ordered insulin. In or around December 2018, Licensee had five (5) different medication errors, varying in explanations. In January 2019, Licensee gave a resident more than the prescribed dose of medication. In January 2019, Licensee did not follow counting procedures on seven (7) different residents. Licensee was counseled on these errors and had difficulty giving an explanation of why the errors occurred. Licensee was terminated effective January 17, 2019 due to the inability to trust her nursing services and care.

Censure 08/07/2019

Nance, Jason L

Florissant, MO

Licensed Practical Nurse 2017011444

On April 26, 2019, Respondent submitted a urine sample for random drug screening. That sample tested positive for the presence of marijuana.

Censure 07/10/2019

PROBATION

Williams, Krensa Kaye

Warsaw, MO

Licensed Practical Nurse 2017033995

On October 11, 2018, Respondent pled guilty to the class D felony of Stealing - Controlled Substance/Meth Manufacturing Material, in violation of §570.030 RSMo, in the Circuit Court of Grundy County, Missouri. Respondent's guilty plea was the result of Respondent misappropriating Hydrocodone, possessed by her employer and owned by a patient.

Probation 07/23/2019 to 07/23/2024

Stites, Sydney Elyse

Kirkville, MO

Licensed Practical Nurse 2010031714

On January 7, 2019, Respondent pled guilty to the class E felony of Assault-3rd Degree, in violation of §565.054, RSMo., in the Circuit Court of Adair County, Missouri.

Probation 07/10/2019 to 07/10/2022

Cahn, Jolene Foy

Grandview, MO

Licensed Practical Nurse 2016004624

For several months in 2016, Respondent provided nursing services to a patient who was a minor with Down syndrome and autism. The patient had a history of self-harm by repeatedly striking his head with or against objects, including the wall. On several occasions, the patient's mother found Respondent asleep while the patient was under her care. On November 20, 2016, the patient's mother reported that the patient had bruising and redness on his forehead caused by repeated strikes to the head while Respondent was

sleeping on duty. Respondent admitted to falling asleep during the shift.

Probation 06/25/2019 to 06/25/2020

Baig, Saima

Ballwin, MO

Registered Nurse 2013016234

On or about November 6, 2017, it was reported to hospital supervisors that Licensee was pre-charting patient assessments. An investigation showed that Licensee was documenting patient assessments before actually assessing the patients. When questioned, Licensee admitted that she was charting patient assessments prior to visiting with the patients in order to save time.

Probation 07/05/2019 to 07/06/2019

Renfro, Dustin Lee

Lincoln, MO

Licensed Practical Nurse 2016005313

On July 15, 2018, it was reported that a co-worker was witnessed diverting Solu-Cortef and giving a shot to Licensee. Licensee admitted to receiving a steroid injection from the co-worker to treat an allergic reaction.

Probation 07/05/2019 to 07/15/2019

Harrigan, Jessica Heidi

Matthews, MO

Licensed Practical Nurse 2003024504

On April 23, 2018, Respondent pled guilty to the class C felony of Introduction of Contraband in Penal Facility, in violation of T.C.A. §39-16-201, in the Circuit Court of Lake County, Tennessee.

Probation 07/23/2019 to 07/23/2024

Gibson, Douglas Chadwick

Saint Louis, MO

Registered Nurse 2006004525

On August 26, 2016, a patient in the Emergency Department reported to a nurse that seven (7) of his personal Percocet prescription tablets were missing. Licensee was not assigned to provide care to the patient; however, Licensee had had contact with the

PROBATION continued on page 12

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Disciplinary Actions**

PROBATION continued from page 11

patient. Licensee's supervisor questioned Licensee about the missing narcotics. Licensee admitted to his supervisor that he had diverted the seven (7) Percocet pills. Licensee showed the supervisor the pills wrapped in a napkin, which he had placed in his locker; Licensee gave the supervisor the pills.

Probation 06/19/2019 to 06/19/2023

Bryant, Julie Elizabeth

Springfield, MO

Registered Nurse 1999137293

Licensee stated that a patient was causing trouble on the floor and acting out. She stated that while she was trying to contain the patient, he head-butted her. Licensee admitted that right after the patient head-butted her, she grabbed the patient by the hair and pushed his head down into his chest so that he could not spit on her or bite her. Licensee further admitted that she grabbed the patient by the hair and pushed his head down into his chest a second time to protect herself and her techs from the patient. Licensee was removed from patient care and suspended pending an investigation. Licensee acknowledged that the facility uses the Mandt System to subdue the children until they are able to be placed in time out, but she indicated she does not believe the Mandt System works. Licensee admitted that her actions toward this patient were done in anger.

Probation 07/23/2019 to 08/12/2019

Holsted, Amanda Marie

Smithville, MO

Licensed Practical Nurse 2011006464

Count I

On July 19, 2017, facility administrators received information that Respondent was recognized for administering more PRN medications than other nurses working with the same patients, and that Respondent had recorded dropping Oxycontin on two separate occasions. A coworker's statement indicated that on July 15, 2017, Respondent contacted her asking her to get some Oxycodone for Respondent's boyfriend. On July 16, 2017, Respondent was reported by several coworkers as exhibiting strange behavior. A coworker's statement indicated that Respondent admitted to taking six Xanax the previous night and four so far that day. When questioned, Respondent denied admitting to taking several Xanax and instead indicated that she has a prescription for Xanax and takes it after she gets off work. Respondent recorded administering prn narcotics on multiple occasions to patients who rarely received the medications.

Count II



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On March 21, 2018, it was reported that Respondent was at Unit 3 Cubex at approximately 0645 hours and appeared to be acting suspicious. Camera footage showed Respondent at the Unit 3 Cubex from 0645 - 0654 hours, and she appeared to have retrieved medications from two drawers during this time and placed them into her left pocket. Per the Cubex report, Respondent pulled two Oxycodone 10 mg tablets for patients that were not assigned to her. Respondent returned to the Rehab Unit nurses station and was observed on camera taking a drink, entering the medication room, grabbing something out of her purse, and placing it in her left pocket. Respondent entered the restroom at 0656 hours and exited at 0700 hours. Respondent went back to the Cubex on Unit 3 and was there from 0839 - 0842 hours. During this time, the camera shows that Respondent opened two drawers and pulled medication out. The device still had three Oxycodone 10 mg tablets unaccounted for. The Director of Nursing immediately suspended Respondent's ability to retrieve narcotics from the Cubex and requested Respondent submit to a for-cause drug screen. The Director of Nursing indicated Respondent stated that she would fail the drug test, as she was taking her husband's oxycodone and hydrocodone for back pain. While the Director of Nursing was retrieving the paperwork for the drug screen, Respondent left the building. Respondent admitted to consuming her husband's Hydrocodone and Oxycodone without a prescription. Respondent provided a written statement to her employer admitting she had pulled two Oxycodone 10 mg tablets out of the Cubex and had them in her possession for approximately two hours. She stated she thought she put them back when she was obtaining Lyrica for a patient on 400 hall.

Count III

On August 17, 2018, Respondent pled guilty to Class E Felony DWI - Persistent.

Probation 06/29/2019 to 06/29/2024

Nabena, Cassandra Dawn

Branson, MO

Registered Nurse 2010023143

On January 29, 2019, the Arkansas State Board of Nursing took final disciplinary action and issued a Cease and Desist Order (Order) on Respondent's privilege to practice nursing in the state of Arkansas.

Probation 06/24/2019 to 06/24/2022

Jacoby, Mindi J

Columbia, MO

Registered Nurse 2000151378

On March 13, 2018, Licensee pled guilty to the class A misdemeanor of stealing, in violation of 6570.030 RSMo, in the Circuit Court of Boone County, Missouri, in case number 18BA-CR00137.

Probation 08/27/2019 to 08/27/2020

Blankenship, Stacy L

Palmyra, MO

Licensed Practical Nurse 027999

Licensee practiced nursing in Missouri with an expired license from June 1, 2016 through May 16, 2019.

Probation 07/31/2019 to 07/31/2020

Ecker, Alicia Renee

Prairie Village, KS

Licensed Practical Nurse 2019030817

On October 22, 2018, the Kansas State Board of Nursing issued a Summary Order denying Applicants application for nursing licensure in Kansas. In the Summary Order, the Kansas Board found the following: An investigation by the Board revealed the applicant had had her drivers license suspended 13 times; a criminal diversion and a conviction for driving under the influence, the most recent of which was a conviction in 2017; a conviction for battery; and miscellaneous other involvements with law enforcement. On May 29, 2018, the Board referred the applicant to the Kansas Nurse Assistance Program (KNAP) for a chemical dependency evaluation and recommendations from KNAP. After a June 18, 2018 chemical dependency evaluation, the applicant was offered a monitoring contract by KNAP. On July 11, 2018, the applicant's participation in the KNAP program was terminated after she declined to execute a monitoring contract. On August 9, 2018, the Board wrote to applicant advising her that, if she refused to execute the KNAP monitoring contract, her application would be re-considered. On the same day, the Board re-referred the applicant to KNAP. On September 4, 2018, the applicant's participation in the KNAP program was terminated after she refused to execute a monitoring contract. The Board subsequently determined to deny the application. Applicant submitted a notarized statement to the Board that she completed the evaluation for KNAP and that she had withdrawn her application with the State of Kansas Board. The Kansas Board denied Applicant licensure for failure to complete the KNAP monitoring contract and due to her history of alcohol use. Applicant has not demonstrated that she has rehabilitated herself. Applicant has not demonstrated that she has the requisite moral character for licensure in Missouri.

Probation 08/07/2019 to 08/07/2022

Schmidt, Tessa Leigh

Louisiana, MO

Licensed Practical Nurse 2019033570

On October 23, 2012, Applicant pled guilty to the class A misdemeanor of Domestic Assault - 3rd degree, in violation of 565.074 RSMo, in the Circuit Court of Callaway County, Missouri, in case number 12CW-CR01203. On October 23, 2012, Applicant also pled guilty to count I - the class A misdemeanor of Domestic Assault - 3rd degree, in violation of 565.074 RSMo, and count II - the class A misdemeanor of Assault 3rd degree, in violation of 565.070 RSMo, in the Circuit Court of Callaway County, Missouri, in case number 12CW-CR00968. On May 21, 2015, Applicant pled guilty to the class C

Disciplinary Actions**

felony of Domestic Assault - 2nd degree, in violation of 565.073 RSMo, in the Circuit Court of Pike County, Missouri, in case number 15PI-CR00067-01. Probation 08/27/2019 to 08/27/2020

Haynes, Jami Leigh

Stotts City, MO

Registered Nurse

At all times relevant herein, Applicant was employed as a Graduate Nurse. On or about February 25, 2016, Applicant was assigned seven patients at the beginning of shift. Applicant documented performing physical assessments on each patient. Applicant failed to physically assess the patients or listen to lung, heart, or bowel sounds for the patients. Three patients were discharged during Applicants shift. Applicant failed to document any discharge notes for the patients. Three new patients were received during Applicants shift. Applicant failed to document any patient assessments for the new patients. Applicant admitted to management that she did not perform assessments on -young and healthy- patients, but documented that she had.

Probation 08/08/2019 to 08/08/2021

Floyd, Gregory Keith

Festus, MO

Registered Nurse 2012006111

Count I

On or about January 11, 2017, it was reported to administrators that Licensee used profane language, spoke disrespectfully when speaking to a resident, and made threats in the presence of employees regarding the use of a weapon. An investigation revealed security camera footage and employee accounts that confirmed the report regarding Licensee.

Count II

On or about the evening of June 24, 2017, it was reported by various staff that a resident was yelling or screaming in an unusual manner. It was further reported by staff that Licensee had administered a Zyprexa injection to the resident in an apparent attempt to get the patient to stop screaming. The resident did not have an order for a Zyprexa injection. Administrators reviewed surveillance video, which showed Licensee drawing up an injection of Zyprexa and entering the patient's room. A later review of the patient's body indicated an injection site on the patient's thigh. When questioned by administrators regarding the aforementioned incident, Licensee began yelling and cursing at the Director of Nursing, and was ultimately escorted from the facility.

Probation 06/21/2019 to 06/21/2021

Smith, Deshawna R

Overland Park, KS

Registered Nurse 2016043350

From January 17, 2017 until the filing of the Complaint, Respondent failed to check in with NTS on six (6) days. Further, on May 24, 2018; June 22, 2018; December 21, 2018; and February 5, 2019, Respondent checked in with NTS and was advised that she had been selected to provide a urine sample for screening. Respondent failed to report to a collection site to provide the requested sample. Pursuant to the terms of Respondent's probation, Respondent was required to obey all federal, state and local laws. On or about April 9, 2019, Respondent reported to the Board that she had a gambling addiction and had received a municipal citation for theft/shoplifting on three (3) separate occasions. On August 8, 2017, Respondent signed a Diversion Agreement acknowledging her guilt of the offense of Theft - Obtain/Exert Unauthorized Control with Intent to Permanently Deprive in the Municipal Court of Overland Park, Kansas. On February 21, 2019, Respondent was found guilty of the offense of Theft - Obtain/Exert Unauthorized Control with Intent to Permanently Deprive, in the Municipal Court of Overland Park, Kansas. On December 7, 2018, Respondent pled guilty to the offense of Theft, in the Municipal Court of Olathe, Kansas.

Probation 06/24/2019 to 06/24/2022

Prohaska, Amber Marie

Oak Grove, MO

Registered Nurse 2007017042

Licensee practiced nursing in Missouri without a license from May 1, 2019 through June 13, 2019. Licensee previously practiced nursing in Missouri without a license from May

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1, 2017 through March 20, 2018.
 Probation 08/08/2019 to 08/08/2020

Cook, Linda R

Marshall, MO

Licensed Practical Nurse 045028

On March 20, 2019, Respondent pled guilty to the class E felony of Unlawful Use of a Weapon - Subsection 4 - Exhibiting, in violation of §571.030, RSMo., in the Circuit Court of Saline County, Missouri.

Probation 06/24/2019 to 07/18/2019

Herndon, Misti Dawn

West Plains, MO

Licensed Practical Nurse 2006022248

On June 28, 2018, Licensee pled guilty to the class A misdemeanor of Theft by Receiving, in violation of A.C.A. 5-36-106, in the Circuit Court of Fulton County, Arkansas. Licensee was given a suspended imposition of sentence with 12 months of probation.

Probation 06/06/2019 to 06/06/2020

Hovis, Suzanne

Sikeston, MO

Registered Nurse 128039

On or about February 19, 2017, Licensee, while in a patient's room, turned the respiratory rate on a patient's ventilator to one. Licensee did not have a physician's order to adjust the settings of the ventilator. Licensee admitted to the Board that she had adjusted the settings on the ventilator.

Probation 06/12/2019 to 06/12/2020

Newman, Ashley Nicole

Liberty, MO

Registered Nurse 2014021953

COUNT I

On July 23, 2018, Licensee received a verbal warning for failing to waste a narcotic and holding a controlled substance after it was pulled and not administering until several hours later. On July 30, 2018, Licensee was counselled on not being in compliance with the policy for wasting controlled substances. After the start of the night shift, it was reported that Licensee had taken an order for Percocet for a patient, then entered another room and stated that the patient did not want the Percocet and she needed to waste it. A coworker observed the waste into the sharps container and cosigned the action. Later, the coworker reported it was his belief that the tablet wasted was not the Percocet. The sharps container in question was taken down and opened and it was found to contain an open Percocet package that had a partial oblong white tablet in it. The shape of the tablet and numbers printed on it confirmed it to be a partial Acetaminophen tablet. On August 16, 2018, Licensee was terminated for not acting in compliance with the Controlled Substance Policy after having been coached and receiving a verbal warning. She documented numerous overrides of controlled substances without an order, did not administer or waste controlled substances until several hours later, and her pain assessments did not match her reason for pulling or giving or asking for pain medication from provider.

PROBATION continued on page 14



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Disciplinary Actions**

PROBATION continued from page 13

COUNT II

Licensee was instructed not to give the patient any medications while the assigned nurse ran to MedSurg. Upon the assigned nurse's return, Licensee had already removed the medication from the Pyxis and had it in a pill cup, already opened, and the pills were not in blister pods. The nurse discovered the pills in the cup looked different than what Hydrocodone should look like. The two pills had scrape marks on each one of them, as if someone removed the labeling on the pills. The pills were later identified by pharmacy as Tylenol 325mg. When questioned, Licensee indicated she did not understand the MAR and had to override for Tylenol in the Pyxis Machine. It was discovered that Licensee removed Hydrocodone and Tylenol 325 mg at the same time. Probation 06/21/2019 to 06/21/2024

Washam, Sarah Marie

Laclede, MO

Registered Nurse 2008029478

On May 7, 2018, Respondent pled guilty to the class D Felony of Possession of Controlled Substance Except 35 Grams or Less of Marijuana/Synthetic Cannabinoid. Probation 06/11/2019 to 06/11/2024

Helton, William Clayton

Saint Charles, MO

Registered Nurse 2012022948

Licensee self-reported to the Board that after leaving his unit, he entered the Intensive Care Unit (ICU) and noticed a patient's Fentanyl infusion, from which Licensee used a syringe to aspirate 5mL of the drug from the patient's IV line. Licensee admits to using the 5mL of Fentanyl topically on a severe contact dermatitis from poison ivy on his wrist and forearms. Licensee admitted to diverting the 5mL of Fentanyl for personal consumption. Licensee agreed and submitted to a for-cause drug screen and rapid alcohol test. Licensee's drug screen returned positive for Fentanyl. Probation 07/23/2019 to 07/23/2024

Meyer, Tammy Gail

Portage, IN

Registered Nurse 2013039019

On January 3, 2019, the Wisconsin State Board of Nursing issued an Order Granting Limited License (Order) "In the Matter of Application for Renewal of a Registered Nursing License of Respondent" due to Respondent being convicted of misdemeanor Reckless Driving and being diagnosed with Alcohol Use Disorder - Severe as of April 20, 2018, with recommendations of long term monitoring. Probation 06/24/2019 to 07/07/2019

Turman, Samantha Lynn

Saint Clair, MO

Licensed Practical Nurse 2012038047

On December 4, 2018, Respondent pled guilty to two (2) counts of the class C Felony of Possession of Controlled Substance Except 35 Grams or Less of Marijuana. Probation 06/11/2019 to 06/11/2024

Vitale, Elizabeth C

Kansas City, MO

Registered Nurse 109188

On July 24, 2018, Respondent entered an Alford plea for the class A misdemeanor of Hindering Prosecution, in the Circuit Court of Platte County, Missouri. Probation 07/25/2019 to 07/25/2022

Gillett, Gina Marie

Columbia, MO

Registered Nurse 2013020813

From May 12, 2016 until the filing of the Complaint, Respondent failed to check in with NTS on four (4) days and failed to check in within the time window on two (2) days. On April 8, 2019, Respondent reported to a collection site to provide a sample, and the sample tested positive for Ethyl Glucuronide (EtG) and Ethyl Sulfate (EtS), both metabolites of alcohol. Respondent admitted to Dr. Greg Elam that she had consumed alcoholic shots the day before she was tested. The sample submitted on April 8, 2019, was also presumed positive for morphine but deemed negative by the Medical Review Officer (MRO) who found the result consistent with Respondent's report of consuming poppy seeds prior to the test. Pursuant to the terms of Respondent's probation, Respondent was prohibited from consuming hemp, poppy seeds or any

product or by-product containing the same. The Board did not receive an employer evaluation or statement of unemployment by the quarterly due date of October 11, 2018.

Probation 06/20/2019 to 06/20/2024

Cureton, Christina Elaine

Hermann, MO

Licensed Practical Nurse 2003024362

As of the filing of the Complaint, the Board had not received proof of any completed hours. Probation 06/20/2019 to 06/20/2020

Spencer, Pamela C

Gladstone, MO

Licensed Practical Nurse 057289

On December 7, 2017 Licensee failed to provide pediatric patient T.N. the 1400 dosage of Baclofen. Licensee informed T.N.'s mother of the error by phone later in the day. Licensee admitted she was tied up with other patients and forgot to administer the medication. On March 19, 2018, pediatric patient O.C.'s mother reported that on or about March 16, 2018, Licensee advised her that she had failed to provide O.C. the prescribed Clonazepam and Guanfacine. Licensee indicated O.C.'s mother was staying with her, so Licensee thought the mother would give those medications. On July 6, 2018, O.C.'s mother contacted Licensee to inquire if O.C.'s tube feeding and medications had been provided during lunch time on this day. Licensee admitted that she had not given the medication or tube feeding. Licensee states in her formal write up that she was not aware that O.C. was in the unit nor did she check the schedule board. Licensee was removed from O.C.'s care. Probation 06/18/2019 to 06/18/2021

Waltman, Joseph William, Jr

Saint Louis, MO

Registered Nurse 2016001348

On March 14, 2017, Respondent pled guilty to the class A misdemeanor of Assault 3rd Degree. Probation 06/12/2019 to 06/12/2021

REVOCATION

Walker, Alvin T

Saint Peters, MO

Licensed Practical Nurse 044721

From April 28, 2018, until the filing of the Complaint on April 9, 2019, Respondent failed to check in with NTS on five (5) days, and failed to check in within the required time window on four (4) days. Further, on May 1, 2018;

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August 16, 2018; and December 13, 2018, Respondent checked in with NTS and was advised that he had been selected to provide a urine sample for screening. Respondent failed to report to a collection site to provide the requested samples. The Board did not receive an employer evaluation or statement of unemployment by the documentation due date of February 22, 2019. The Board did not receive proof of continued support group attendance by the documentation due date of February 22, 2019.

Revoked 06/13/2019

Thomas, Sara I

Ballwin, MO

Licensed Practical Nurse 2002027077

Respondent never completed the contract process with NTS. Respondent was advised by UPS Ground Service to attend a meeting with the Board's representative on July 17, 2018. Respondent did not attend the meeting or contact the Board to reschedule the meeting. Respondent failed to submit an employer evaluation or statement of unemployment by the quarterly due date of October 2, 2018. Respondent failed to submit proof of regular attendance at support group meetings by the quarterly due date of October 2, 2018. Respondent failed to submit an updated chemical dependency evaluation by the quarterly due date of October 2, 2018. On November 6, 2018, Respondent pled guilty to the class D felony of driving while intoxicated in violation of §577.010 RSMo in the Circuit Court of Clinton County, Missouri, for events occurring on July 29, 2018.

Revoked 06/20/2019

Ingles, Brittany Nicole

Sorento, IL

Registered Nurse 2014011419

On January 10, 2019, the Illinois State Board of Nursing took final disciplinary action and issued an Order revoking the nursing license of Respondent due to Respondent pleading guilty to one count of the class 1 felony of residential burglary, and one count of the class 3 felony of possession of methamphetamines.

Revoked 06/11/2019

Brand, Tereasa L

Lebanon, MO

Registered Nurse 153562

On or about November 20, 2016, Respondent was working as a charge nurse when she asked to borrow another nurse's medication room keys. As a charge nurse during that shift, Respondent was not responsible for distributing medications. After an extended period of time, Respondent returned the nurse's keys. The nurse noticed that Respondent had altered the facility's narcotic count sheet. The nurse later discovered that a card of Norco 10/325 was missing from the unit where Respondent was working. Later that day, Respondent left the facility an hour and a half prior to the end of her shift through a side exit. Respondent never returned to the facility and did not contact the facility.

Revoked 08/26/2019

Lapinski, Scott Charles

Saint Louis, MO

Registered Nurse 2007025828

From March 26, 2019 until the filing of the Complaint, Respondent failed to check in with NTS on eight (8) days, and additionally failed to check in within the required time window on three (3) days. In addition, on May 6, 2019, Respondent failed to check in with NTS; however, it was a day that Respondent had been selected to submit a sample for testing. Therefore, Respondent failed to report to a collection site to provide a sample for testing on May 6, 2019. On April 22, 2019, Respondent submitted a urine sample for random drug screening. That sample tested positive for the presence of Amphetamine and Methamphetamine. On July 10, 2019, Respondent submitted a urine sample for random drug screening. That sample tested positive for the presence of Amphetamine and Methamphetamine. On July 17, 2019, Respondent submitted a urine sample for random drug screening. That sample tested positive for the presence of Amphetamine and Methamphetamine. The Board did not receive an employer evaluation or statement of unemployment by the documentation due date of May 20, 2019. The Board did

not receive the update of chemical dependency treatment evaluation by the documentation due date of May 20, 2019. Respondent last used drugs on July 14, 2019.

Revoked 08/28/2019

Truetken, Anna E

Florissant, MO

Registered Nurse 2014041324

Count I

On or about March 3, 2017, Barnes Jewish began an investigation after an unidentified female wearing scrubs was reported tampering with approximately two or three patients' Patient Controlled Analgesia ("PCA") pumps and withdrawing liquid from them. A report indicated that Respondent had accessed the patients' charts despite not being assigned to them or having any other legitimate reason to do so. The hospital further discovered that Respondent had accessed the charts of approximately 383 different patients between on or about March 1, 2017 and on or about March 3, 2017, the vast majority of whom were not under her care. Subsequently, the hospital took samples of approximately ten PCAs of patients receiving Hydromorphone, who were still in the hospital and whose charts had been accessed by Respondent. Eight different samples contained diluted concentrations of Hydromorphone. Respondent refused to submit a sample for the for-cause drug screen. Respondent admitted at the time that, if she took a drug screen, it would likely return positive for marijuana and Tramadol, as she had used marijuana two days prior and had used Tramadol without a prescription.

Count II

On or about October 17, 2017, hospital staff noticed Respondent exhibiting abnormal behavior, including the fact that Respondent was still at the hospital five hours after her shift ended working on her charting. On or about October 17, 2017, St. Luke's requested, and Respondent submitted to, a for cause drug screen. Respondent's drug screen was positive for morphine and opiates. The hospital conducted an audit of Respondent's narcotics activity from on or about October 1, 2017 through on or about October 17, 2017, which revealed six missing wastes of morphine IV, one missing vial of morphine, and three instances of Respondent dispensing narcotics when she was not clocked in, either before or after her shift start time.

Revoked 08/28/2019

Aye, Shannon Lynn

Saint Louis, MO

Registered Nurse 2011021483

According to the West Pyxis machine report on October 2, 2015, Respondent logged into the West Pyxis machine at approximately 1757 hours. According to the North Pyxis machine report on October 2, 2015, Respondent logged into the North Pyxis machine at approximately 1754 hours, 1808 hours, and 1816 hours. On October 3, 2015, at approximately 0700 hours, Nurse C.F. documented that patient S.M.'s medication was missing. At 1900 hours on November 3, 2015, the inventory was performed by L.M and Respondent, at which time narcotics were missing.

When Respondent was questioned about the missing narcotics, she denied taking them. Respondent was requested to submit to a drug screen, which she agreed to. After submitting to the drug screen, Respondent contacted the Human Resources Business Partner and admitted to stealing the Oxycodone for her own personal use. Respondent stated that she had an addiction to opiates and never ingested the pills while she was at work. The results from the drug screen came back as negative.

Revoked 06/03/2019

McKinnell, Frederic M

Shawnee Mission, KS

Registered Nurse 132009

On January 30, 2019, the Kansas State Board of Nursing took final disciplinary action and issued a Summary Order suspending the nursing license of Respondent due to Respondent inappropriately restraining a patient, verbal abuse, and admitting to consuming Xanax for which he did not have a prescription. The Summary Order became effective as a Final Order on February 17, 2019.

Revoked 08/28/2019

Thompson, Lynda Dianne

Fenton, MO

Licensed Practical Nurse 2001007338

On or about March 1, 2017, Respondent fell asleep on duty and was not easily awakened. When Respondent did wake up, Respondent was unable to walk unassisted, speak intelligibly, operate a telephone, or type on a keyboard. Respondent then fell asleep again. Because of her impaired behavior, Respondent was taken by ambulance to a hospital. Respondent told the facility that her behavior was due to her accidentally having taken two doses of her prescribed medication. On or about June 10, 2017, following her return from the medical leave of absence, Respondent again fell asleep multiple times while on duty. Respondent again displayed impaired behavior, including sluggishness, uncontrollable laughter, inability to walk unassisted, inability to type on her computer, and an inability to check herself out when asked to leave the facility. On or about June 12, 2017, Respondent was terminated for incompetent or inefficient work which jeopardizes a resident's welfare and for sleeping or giving the appearance of sleeping.

Revoked 08/28/2019

McLoughlin, Christopher Todd

Indianapolis, IN

Registered Nurse 2006006156

On March 28, 2019, the Indiana State Board of Nursing took final disciplinary action and issued Final Order Accepting Proposed Findings of Fact, Conclusions of Law, and Order (Order) indefinitely suspending the Indiana nursing license of Respondent for no less than five (5) years.

Revoked 08/28/2019

REVOCATION continued on page 16



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Disciplinary Actions**

REVOCATION continued from page 15

Fine, Kayla Rene

Kansas City, MO

Registered Nurse 2002021430

On or about June 22, 2018, it was reported to the Department Director that Respondent was very upset and they were working on getting her into a staff lounge. Upon the Department Director's arrival, Respondent appeared to be flushed and was holding her purse and car keys. Respondent was witnessed throwing these items on the table and stating, "I am so mad. I am getting out of here. I am hot. I think I will just dump this ice water on my head." Respondent was escorted upstairs to a Behavioral Health Facility and she remained off work for approximately one week. Later on June 22, 2018, a patient reported to the Department Director that earlier that morning, Respondent had been having bizarre behavior and that he was physically assaulted by her. Specifically, the patient reported that Respondent shoved on his shoulder and pushed him around in bed and grabbed the patient's room phone, ripped it from the wall, and slammed it down on the table. Additional behavior reported by this patient indicated he previously witnessed Respondent going through his wallet, pulling out various cards and asking the patient if it was really him on the cards. On another occasion, the same patient reported that Respondent went to obtain the patient's medication, but returned with a toothbrush, toothpaste, and a basin. When the patient informed Respondent that he did not feel like brushing his teeth, Respondent slammed the basin on the table and said, "Brush your god damn teeth!" and left the room. The same patient also indicated that Respondent would ask the patient about his religious preferences and why he had them. The patient stated Respondent would be "laughing oddly then act as if she was upset." Respondent was terminated on July 9, 2018 for "acting with careless disregard for another."

Revoked 08/28/2019

Hagemeier, Julie Marie

Troy, MO

Licensed Practical Nurse 2012032141

A patient's mother reported to agency administrators that Respondent failed to report for her scheduled shift at the patient's home on or about April 1, 2017. The patient's mother also reported that she had not signed Respondent's timesheets from on or about January 7, 2017 through on or about March 10, 2017. However, Respondent submitted signed timesheets for that same period purporting to reflect the signature of the patient's mother. An investigation by agency administrators revealed that Respondent forged the mother's signature on the timesheets.

Revoked 06/13/2019

Stramel, Stacy Frances

Victoria, KS

Registered Nurse 2006035266

On April 5, 2019, the Kansas State Board of Nursing took final disciplinary action and issued an Initial Order denying the renewal of the nursing license of Respondent.

Revoked 08/28/2019

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Chumbley, Amber Michelle

Salem, MO

Licensed Practical Nurse 2009031098

Respondent never completed the contract process with NTS. The Board did not receive an employer evaluation or statement of unemployment by the documentation due date of January 17, 2019. In accordance with the terms of the Agreement, Respondent was required to meet with representatives of the Board at such times and places as required by the Board. Respondent was advised by UPS to attend a meeting with the Board's representative on October 23, 2018. Respondent did not attend the meeting or contact the Board to reschedule the meeting.

Revoked 08/26/2019

- Death of Child - No Sexual Contact; the class E felony of Tampering with Physical Evidence in Felony Prosecution; and the class D felony of Stealing - Controlled Substance/Meth Manufacturing Material, in the Circuit Court of Polk County, Missouri. Respondent was sentenced to five (5) years of incarceration in the Missouri Department of Corrections. Respondent's guilty pleas were the result of Respondent misappropriating morphine sulfate from her employer and causing the death of her juvenile son through criminal negligence.
Revoked 06/03/2019

Porter, Semaj DeAnna

Saint Louis, MO

Registered Nurse 2009031432

On August 22, 2018, Respondent was found guilty of the class C felony of Endangering the Welfare of a Child - 1st Degree.

Revoked 06/11/2019

Cook, Heather Rochelle

Battlefield, MO

Registered Nurse 2009020149

From January 3, 2019 until the filing of the Complaint on April 10, 2019, Respondent failed to check in with NTS on four (4) days, including one (1) instance in which she checked in outside the requisite time window. Respondent failed to check in with NTS on February 2 and 3, 2019, because she forgot and was having auditory hallucinations. Further, on February 14, 2019, Respondent checked in with NTS and was advised that she had been selected to provide a urine sample for screening. Respondent failed to report to a collection site to provide the requested sample. Respondent failed to test on February 14, 2019, because she knew she would be positive for methamphetamine because she had relapsed. On or about February 20, 2019, Respondent reported a drug relapse to the Board after her psychiatrist provided a mental health continuing treatment form to the Board indicating Respondent had reported a relapse the previous week. The Board did not receive evidence of continued support group attendance by the quarterly due date of February 28, 2019. On March 11, 2019, Respondent reported to a collection site to provide a sample, and the sample tested positive for Ethyl Glucuronide (EtG) and Ethyl Sulfate (EtS), metabolites of alcohol. When questioned by Dr. Greg Elam, Respondent admitted to drinking six (6) shots of whiskey the day before submitting her sample.

Revoked 06/20/2019

Snell, Tiffany Darlene

Saint Louis, MO

Registered Nurse 2004024370

On February 7, 2019, the Virginia State Board of Nursing issued a Ratification and Order (Order) accepting the Report and Recommendation of Agency Subordinate (Report), indefinitely suspending Respondent's privilege to practice nursing in the state of Virginia.

Revoked 06/20/2019

Cunningham, Brad Lee

Springfield, MO

Registered Nurse 2012021945

On June 10, 2017, Respondent reported to work for his shift and received a report on the patients under his care. After approximately two (2) hours, Respondent left a post-it note saying that he quit, and then left the building without giving any report to any oncoming nurse or even advising anyone that he was leaving. Respondent abandoned the patients under his care.

Revoked 06/11/2019

Johnson, Amy Michelle

Wentzville, MO

Licensed Practical Nurse 2009003283

From May 7, 2019, until the filing of the Complaint, Respondent failed to check in with NTS on thirty-seven (37) days. Respondent ceased checking in with NTS on May 18, 2019. Further, on May 17, 2019, Respondent checked in with NTS and was advised that she had been selected to provide a urine sample for screening. Respondent failed to report to a collection site to provide the requested sample. In addition, on May 24, 2019, Respondent failed to check in with NTS; however, it was a day that Respondent had been selected to submit a sample for testing. Therefore, Respondent failed to report

Bass, Kristi Leigh

Dexter, MO

Registered Nurse 2007021904

On February 15, 2018, the Kentucky Board of Nursing took final disciplinary action and issued its Findings of Fact, Conclusions of Law, and Order suspending Respondent's Kentucky nursing license for a minimum of two (2) years, based on Respondent testing positive for cocaine while on duty, and subsequently failing to complete the Kentucky Board's requirement of obtaining a mental health/substance use disorder evaluation.

Revoked 06/11/2019

Baker, Danielle Christine

Bolivar, MO

Registered Nurse 2017010745

On January 7, 2019, Respondent pled guilty to: the class A felony of Endangering the Welfare of a Child - 1st Degree

Disciplinary Actions**

to a collection site to provide a sample for testing on May 24, 2019. The Board did not receive a thorough chemical dependency evaluation submitted on Respondent's behalf by the documentation due date of May 28, 2019.

Revoked 08/26/2019

Hickam, Jacqueline Marie

Carbondale, IL

Registered Nurse 2014004397

On or about March 20, 2017, during her orientation period, Respondent withdrew 10 mg Valium and documented the administration of 5 mg Valium. Respondent did not document the waste, administration, or return of the remaining 5 mg Valium. Respondent's coworkers further noticed that her behavior was erratic. She additionally would unexpectedly disappear from patient care for extended periods of time. The facility's investigation revealed multiple discrepancies in the documentation of the waste, administration, or return of narcotics. On or about March 27, 2017, Respondent was terminated from the facility due to failure to follow policy on medication administration and documentation.

Revoked 08/26/2019

not chart the administration or waste of the medications. Licensee was placed on administrative leave for possible diversion. Licensee denied the allegation of diversion, but admitted to taking shortcuts while completing his charts. On or about August 2, 2017, Licensee falsely documented lab results for a patient. On or about September 24, 2017, Licensee failed to note that a patient, who was assigned to his care, was in a-fib and that her blood pressure was in the low 70s. The patient was also ordered to receive a continuous levophed gtt drip. Licensee turned the drip off when the bag was empty and failed to replace the bag. As a result, the patient went without the drip for approximately fifteen minutes. The patient's physician was called and he ordered a dosage of medication for immediate administration, but Licensee failed to administer the ordered medication and another staff member ultimately started the medication for the patient. The patient was ultimately transferred to ICU where she coded twice. Licensee was redeployed from inpatient to a non-patient care area, but Licensee did not succeed in the non-patient area and was terminated from the facility.

Voluntary Surrender 07/23/2019

Beavers, Jennifer Christine

Union, MO

Licensed Practical Nurse 2008029358

Licensee voluntarily surrendered her license.
Voluntary Surrender 08/15/2019

Bryant, Julie Elizabeth

Springfield, MO

Registered Nurse 1999137293

Licensee voluntarily surrendered her Missouri nursing license effective August 13, 2019.
Voluntary Surrender 08/13/2019

Taylor, Michael R

Saint Louis, MO

Registered Nurse 150587

Licensee diverted Fentanyl from his employer over an approximate four-month period in 2015, while working as a physician assistant. Licensee admitted to injecting the Fentanyl in an effort to relieve his withdrawal symptoms. On or about November 23, 2015, a co-worker observed Licensee diverting Fentanyl, and was reported. Licensee tested positive for amphetamine on or about July 27, 2016, and admitted that he had taken Adderall without a prescription. On or about August 9, 2017, Licensee reported to the Board that he had suffered a relapse of an addiction to controlled substance.
Voluntary Surrender 06/24/2019

Watt, Michael A

Saint Louis, MO

Registered Nurse 2017025760

On or about May 21, 2019, the parents of a pediatric patient who requires overnight care contacted the agency to request Licensee be removed from their child's assignment and their home immediately. The patient's parents indicated that they had installed a surveillance camera in the patient's room over the weekend. Licensee is seen in the video holding his phone in his right hand and placing his left hand down his pants, appearing to rub himself. Licensee removed his hand from his pants, put his hand down his pants a second time, and repeated the movements. The patient was asleep in his crib for the duration of this incident. Licensee denied pleasuring himself and claimed he was fully clothed and did not expose himself to anyone in the home. Licensee admitted that he may have had his hand down his pants and that he may have rubbed himself a little bit.
Voluntary Surrender 07/31/2019

Gooch, Katherine L

Jefferson City, MO

Registered Nurse 151581

On March 6, 2016, the patient's mother stated she was going shopping. Licensee asked the patient's mother to buy her a bottle of Cinerator Whiskey and bring it back to the home, and to withdraw \$20.00 in cash. Licensee gave the patient's mother her personal debit card and corresponding PIN in order to get the whiskey and cash. Licensee used the cash to purchase leftover Vicodin prescribed to the patient after a wisdom tooth extraction from the patient's mother. The patient's mother sold Licensee ten (10) to twelve (12) Vicodin pills. Licensee had the patient's mother sign the narcotic log indicating that she had witnessed Licensee waste the remaining Vicodin pills. Licensee admitted to agency administrators that she had the patient's mother purchase the alcohol for her and bring it back to the patient's home. Licensee also admitted to having the patient's mother withdraw money for Licensee.
Voluntary Surrender 07/30/2019

SUSPENSION

Hawley, Claudia Lorenz

Dixon, MO

Registered Nurse 2010013523

Failure to comply with the requirements of the Alternative Program Non-Disciplinary Consent Agreement.

Suspension 07/23/2019

Jackson, Andrea Tatum

Sunrise Beach, MO

Licensed Practical Nurse 2013001659

Failure to comply with the requirements of the Intervention Program Non-Disciplinary Consent Agreement

Suspension 07/10/2019

Bowe, Kimberly K

Chillicothe, MO

Registered Nurse 133617

Failure to comply with the requirements of the Intervention Program Non-Disciplinary Consent Agreement

Suspension 06/19/2019

Ellis, Shawna Christine

Jonesburg, MO

Registered Nurse 2010040868

Failure to comply with the requirements of the Intervention Program Non-Disciplinary Consent Agreement.

Suspension 06/28/2019

Atkins, Elizabeth Joyce

Olathe, KS

Registered Nurse 2012038820

Failure to comply with the requirements of the Intervention Program Non-Disciplinary Consent Agreement

Suspension 06/27/2019

Koesterer, Mallory Rae

Wentzville, MO

Registered Nurse 2013030705

Failure to comply with the requirements of the Alternative Program Non-Disciplinary Consent Agreement.

Suspension 08/05/2019

Cook, Linda R

Marshall, MO

Licensed Practical Nurse 045028

On March 20, 2019, Respondent pled guilty to the class E felony of Unlawful Use of a Weapon - Subsection 4 - Exhibiting, in violation of §571.030, RSMo., in the Circuit Court of Saline County, Missouri.

Voluntary Surrender 07/19/2019

Dueker, Lindsey Paige

Orofino, ID

Registered Nurse 2016002741

In October 2017, Licensee showed up for the first time as a high narcotic user on the monthly deviation report. On November 1, 2017, Licensee was issued a corrective action form for twelve unexcused absences. On November 29, 2017, Licensee was found locked in the staff bathroom by the manager of the Emergency Department. Licensee was seated on the floor with 22g needle attached to a J-Loop filled with Propofol inserted into her left hand. Licensee was disoriented and had the bottle of Propofol on the floor next to her. 250 mg of the Propofol was missing from the bottle. Licensee admitted to diverting Propofol, Morphine, Dilaudid, Fentanyl, Valium, and Ativan. Licensee was asked to submit to a for-cause drug screen. Licensee's urine sample was confirmed positive for the presence of Morphine, Hydromorphone, Fentanyl, and Norfentanyl.
Voluntary Surrender 08/28/2019

Meyer, Tammy Gail

Portage, IN

Registered Nurse 2013039019

Licensee voluntarily surrendered her Missouri nursing license effective July 8, 2019.

Voluntary Surrender 07/08/2019

Jarman, Shanda Renee

Centerview, MO

Registered Nurse 2015026470

COUNT I

In September 2017, Licensee was assigned to provide in-home overnight care for patient P.H. Throughout her shifts on September 5, 2017, through September 8, 2017, Licensee exhibited inappropriate and careless behavior while caring for patient P.H., including failing to administer scheduled feedings, failing to perform and/or document care, and falling asleep on multiple occasions. On September 8, 2017, Licensee was found asleep in patient P.H.'s bed. Licensee was awoken by the patient's father and, after being questioned by the father, admitted to consuming alcohol while on duty. When Licensee was asked to leave the patient's home, she began banging on doors and windows and throwing her vehicle keys down the street. Licensee was removed from the scene by the Police Department.

COUNT II

On the afternoon of November 17, 2018, a resident experienced a diabetic incident. Licensee was found to be absent from the facility. Licensee was discovered asleep in her car in the parking lot. When awakened, Licensee was disoriented, smelled of alcohol, was unsteady in her gait and hands, and appeared to be intoxicated. Licensee was ordered to cease working and transportation from the facility was arranged.

Voluntary Surrender 08/26/2019

VOLUNTARY SURRENDER

Hayes, Chris Dale

Stewartsville, MO

Registered Nurse 2016019051

It was found that Licensee had dispensed narcotics on two different occasions while working the 2 South Unit and did



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Frequently Asked Questions

Q1: I live in a noncompact state. How do I get a compact multistate license?

Only nurses who declare a compact state as their primary state of residence may be eligible for multistate license. As a resident of a noncompact state, you may apply for a license by endorsement in a compact state. Your eligibility will be limited to a single state license that is valid in that state only. As a resident of a noncompact state, you can have as many single-state licenses as you wish, but are not eligible for a multistate license.

Q2: Where is the compact application and what is the application fee?

Use the state board of nursing (BON) application for licensure by exam or by endorsement, as found on your BON's website. Licensure fees vary by state. If your legal residence is in a state that joined the compact as of Jan. 19, 2018 (Florida, Georgia, Oklahoma, West Virginia and Wyoming), and you hold a single state license in that state, then you should complete the application for a multistate license on your BON website.

Q3: I live in a compact state and have a license. How do I know if my license is multistate? How do I get a compact license?

If your legal residence is in a state that joined the compact as of Jan. 19, 2018 (Florida, Georgia, Oklahoma, West Virginia and Wyoming), and you hold a single state license in that state, then you should complete the application for a multistate license on your board of nursing website.

If your legal residence is in one of the original compact states and you held a multistate license on July 20, 2017, you may already have a compact license due to being grandfathered.

If you're unsure of your licensure status, use the Nursys® QuickConfirm tool at www.nursys.com. This report will indicate "multistate" or "single state" in the status column. When you click on "Where can the nurse practice?" you will see a map (or a list) of all states where you hold the authority to practice.

Q4: I have a compact license. How long can I work in another compact state?

There is no time limit. As long as you maintain legal residency in the state that issued your multistate license and you remain in good standing, you may practice in other compact states.

If you were to take an action (while practicing in another NLC state or otherwise) which would change your legal residency status (see example below), then you have given up legal residency in that home state and you must now apply for license by endorsement in the new state of residence. The new license issued will replace the former license.

For example, a nurse has legal residency in Arizona and practices temporarily in Colorado for six months under the Arizona multistate license. While the nurse is practicing in Colorado, her Arizona driver's license expires. Rather than renewing the Arizona driver's license, the nurse obtains a Colorado driver's license. Because a Colorado driver's license is only issued to a Colorado resident, the nurse has now become a Colorado resident unintentionally. Nurses must be careful not to take actions that would change their state of legal residency, when practicing in another state where they temporarily reside.

Q5: What if I move to another compact state?

When permanently relocating to another compact state, apply for licensure by endorsement and complete the Declaration of Primary State of Residence form within the application, which can be found on your board of nursing's website.

You may start the application process prior to or after the move. You should not delay applying once you have moved. There is no grace period.

- If you are moving from a compact state, you may not wait until your former multistate license expires before applying in your new state of legal residency. You can only practice on your former home state license until the multistate license in the new NLC home state is issued.
- If you are moving from a noncompact state applying to a compact state in advance of the move, you may be issued a single state license or your application may be held until you move and have proof of legal residency at which time you may be issued a multistate license.

Q6: My primary state of residence is a noncompact state; it is also where I am licensed. I am applying for licensure in a compact state. Do I have to give up my current license?

No, you may choose to keep and renew your current noncompact state license.

Q7: I live in a compact state where I am licensed. How do I get a license in a noncompact state?

Apply for licensure by endorsement to the board of nursing in the state where you seek a license. You may be issued a single state license valid only in the state of issuance. Applications can be found on that board of nursing's website. Visit ncsbn.org for board of nursing contact information.

Q8: I am graduating from a nursing program. Can I take the NCLEX® in a different state?

The NCLEX® is a national exam and can be taken in any state convenient to you. It is not a state exam. The results will be directed to the board of nursing where you applied for your authorization to test (ATT) and licensure.

- If you are applying to a compact state for a multistate license, you should apply in the state where you intend to legally reside.
- If you are applying for a license in a noncompact state, you should apply for a license in the state where you intend to practice.

Q9: I live in a noncompact state, but I will be changing my primary state of residence to a compact state in a few months for a job. Can I apply for a license in that state now so I can work immediately after moving?

Yes. You may start the application process prior to the move. A new compact license will not be issued until you provide a Declaration of Primary State of Residence (PSOR) form and any proof of residence that may be required by the board of nursing (BON). Some states offer a temporary license; this may enable you to practice before your permanent license is issued. Check with your BON to see if they offer one.

Q10: I live in a noncompact state, but own property in a compact state. Can I get a compact license?

In order to be eligible for a compact license, your declared primary state of residence must be a compact state. Primary state of residence does not pertain to owning property but rather it refers to your legal residency status. Proof of residence includes obtaining a driver's license, voting/registering to vote or filing federal taxes with an address in that state. These legal documents should be issued by the same state.

Q11: I have a compact license and have accepted a temporary assignment in another compact state. My employer is telling me that I need to get that state's license. Is this true?

When hired in a remote state for a temporary position or commuting to a remote state from the primary state of residence (PSOR) (usually an adjacent state), employers should not require you to apply for licensure in the remote state when you have lawfully declared another state as your PSOR. PSOR is based on where you pay federal income tax, vote and/or hold a driver's license. The remote state board of nursing cannot issue a license to a nurse who has declared another compact state as the PSOR, since the multistate license from the home state applies to both states. You have the privilege to practice in any remote compact state with your multistate license issued by your home state.

Q12: How does the compact work for military or military spouses?

See military fact sheet on our Toolkit webpage at www.ncsbn.org/6183.htm for additional information. For more information about the NLC, visit www.ncsbn.org/nlc or email nursecompact@ncsbn.org.

Q13: How does the NLC pertain to advanced practice registered nurses (APRNs)?

The NLC pertains to registered nurses and licensed practical/ vocational nurses licenses only. An APRN must hold an individual state license in each state of APRN practice. Visit ncsbn.org for BON contact information. Visit aprncompact.com for information on that compact.

Q14: Which nurses are grandfathered into the enhanced Nurse Licensure Compact (eNLC) and what does that mean?

Nurses in eNLC states that were members of the original NLC may be grandfathered into the eNLC. Nurses who held a multistate license on the eNLC effective date of July 20, 2017, in original NLC states, may be grandfathered. You can check if you hold a multistate license and the states in which you have the "authority to practice" by following the steps below.

- a. Go to nursys.com and click on nursys quick confirm
- b. Search by your name, license number or NCSBN ID
- c. Click "View Report."
- d. On the report page, click "Where can the nurse practice as an RN and/or PN?"

If you do not have a multistate license and you need to change your single state license to a multistate, contact the board of nursing. They may require proof of residence such as a driver's license prior to issuing you a multistate license.

Q15: Why would a nurse need a multistate license?

Nurses are required to be licensed in the state where the recipient of nursing practice is located at the time service is provided. A multistate license allows the nurse to practice in the home state and all compact states with one license issued by the home state. This eliminates the burdensome, costly, and time consuming process of obtaining single state licenses in each state of practice.

Q16: What is the difference between a compact license and a multistate license?

There is no difference between a compact license and a multistate license. This terminology is used interchangeably to reference the Nurse Licensure Compact (NLC) license that allows a nurse to have one license, with the ability to practice in all NLC compact states.

Q17: What do I need to do before I move to another state?

See moving scenarios fact sheet on our Toolkit webpage at www.ncsbn.org/nlc-toolkit.htm.

Q18: What does Primary State of Residence (PSOR) mean?

For compact purposes, PSOR is not related to property ownership in a given state. It is about your legal residency status. Everyone has legal documents such as a driver's license, voter's card, federal income tax return, military form no. 2058, or W2 form from the PSOR. If a nurse's PSOR is a compact state, that nurse may be eligible for a multistate (compact) license. If a nurse cannot declare a compact state as his/her PSOR, that nurse is not eligible for a compact license. They may apply for a single state license in any state where they wish to practice.



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Uniform Licensure Requirements for a Multistate License

Requirements:

An applicant for licensure in a state that is part of the eNLC will need to meet the following uniform licensure requirements:

1. Meets the requirements for licensure in the home state (state of residency);
2. a. Has graduated from a board-approved education program; or
 - b. Has graduated from an international education program (approved by the authorized accrediting body in the applicable country and verified by an independent credentials review agency);
3. Has passed an English proficiency examination (applies to graduates of an international education program not taught in English or if English is not the individual's native language);
4. Has passed an NCLEX-RN® or NCLEX-PN® Examination or predecessor exam;
5. Is eligible for or holds an active, unencumbered license (i.e., without active discipline);
6. Has submitted to state and federal fingerprint-based criminal background checks;
7. Has not been convicted or found guilty, or has entered into an agreed disposition, of a felony offense under applicable state or federal criminal law;
8. Has no misdemeanor convictions related to the practice of nursing (determined on a case-by-case basis);
9. Is not currently a participant in an alternative program;
10. Is required to self-disclose current participation in an alternative program; and
11. Has a valid United States Social Security number.

For more information about the eNLC, visit ncsbn.org/eNLC.

Change Form



STATE OF MISSOURI DIVISION OF PROFESSIONAL REGISTRATION NAME/ADDRESS CHANGE FORM

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(573) 751-0681
Fax: (573) 751-0075
Email: nursechange@pr.mo.gov

EXPRESS MAIL DELIVERY ADDRESS:
3605 MISSOURI BOULEVARD
JEFFERSON CITY, MO 65109
Website: <http://pr.mo.gov/nursing>

PERSONAL INFORMATION

<input type="checkbox"/> NAME	<input type="checkbox"/> ADDRESS	<input type="checkbox"/> PHONE	<input type="checkbox"/> EMAIL
<input type="checkbox"/> RN	<input type="checkbox"/> LPN	MISSOURI LICENSE NUMBER	LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER

FULL NAME (LAST, FIRST, MIDDLE) **AS CURRENTLY IN OUR SYSTEM**

NEW INFORMATION

NEW NAME (LAST, FIRST, MIDDLE)

PRIMARY STATE OF RESIDENCE ADDRESS (WHERE YOU VOTE, PAY FEDERAL TAXES, OBTAIN A DRIVER'S LICENSE)

CITY	STATE	ZIP CODE
------	-------	----------

MAILING ADDRESS (ONLY REQUIRED IF DIFFERENT THAN PRIMARY RESIDENCE ADDRESS)

CITY	STATE	ZIP CODE
------	-------	----------

TELEPHONE NUMBER	EMAIL ADDRESS
------------------	---------------

ATTESTATION

I declare _____ as my primary state of residence effective _____.

I am employed exclusively in the U.S. Military (Active Duty) or with the U.S. Federal Government and am requesting a Missouri single-state license regardless of my primary state of residence.

Information on the Nurse Licensure Compact can be found at www.ncsbn.org/nlc. In accordance with the Nurse Licensure Compact "Primary State of Residence" is defined as the state of a person's declared fixed, permanent and principal home for legal purposes; domicile. Documentation of primary state of residence that may be requested (but not limited to) includes:

- Driver's license with a home address
- Voter registration card displaying a home address
- Federal income tax return declaring the primary state of residence
- Military Form no. 2058 – state of legal residence certificate
- W-2 from US Government or any bureau, division or agency thereof indicating the declared state of residence

Proof of any of the above may be requested.

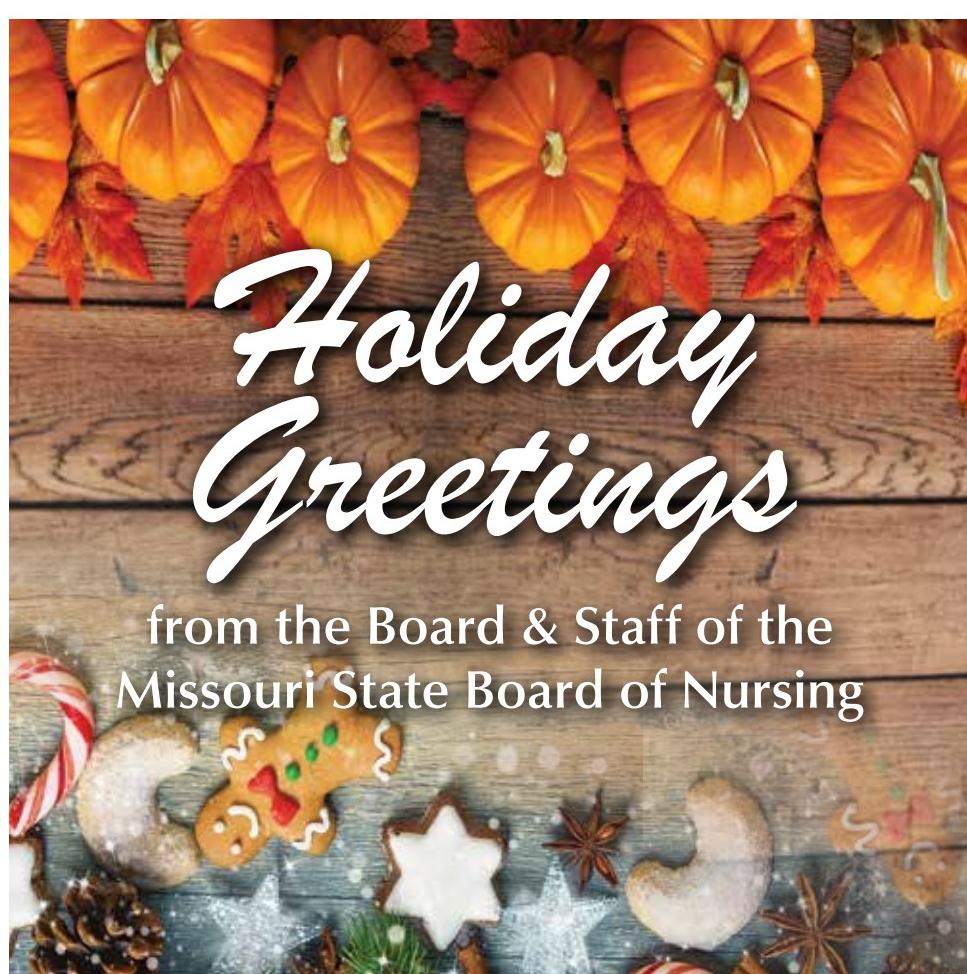
- ⇒ If your primary state of residence is a non-compact state, your license will be designated as a single-state license valid only in Missouri.
- ⇒ If your primary state of residence is a compact state other than Missouri and you have a current multi-state license in that state, your Missouri license will be placed on inactive status and you can practice in Missouri based on your unrestricted multi-state license from another compact state.

I solemnly declare and affirm, that I am the person who is referred to in the foregoing declaration of primary state of residence; that the statements therein are strictly true in every respect, under the pains and penalties of perjury.

SIGNATURE

DATE

You may return the completed form to the Board office via mail, fax, or email. The Board's contact information can be found at the top of this form.



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